



City of Newton  
Health and Human Services  
Deborah Youngblood, PhD, Commissioner  
1000 Commonwealth Ave Newton, MA 02459  
(617) 796-1420



Public Health  
Prevent. Promote. Protect.

Food Establishment Inspection Report - FDA

Insp Date: 11/16/2017 Business ID: 1N2046  
Business: Angier School  
1697 Beacon St.

Newton, MA 02468

Inspection: 6N000003  
Section: 3  
Phone: 559-9300  
Inspector: 1N11123 Nicola Assan  
Reason: 1-Routine  
Results: No Follow-up R1

Inspection Summary

Official Order for Correction: Based on an inspection today, the items checked indicate violations of 105 CMR 590.000/ 2013 Federal Food Code. This report, when signed below by the Commissioner of Health / Agent constitutes an order by the Commissioner of Health. Failure to correct violations cited in this report may result in suspension or revocation of the food establishment permit and cessation of food establishment operations. If aggrieved by this order, you have the right to a hearing. The request must be in writing and submitted to the Commissioner of Health at the above address within 10 days of receipt of this order.

Est. Type 1 - Food Svc Establis License/Permit # \_\_\_\_\_ Risk Category 02 Risk Level Observed 02 Low

Foodborne Illness Complaint Investigated (All) ☐ Involving More Than Two Persons ☐

FOODBORNE ILLNESS RISK FACTORS AND PUBLIC HEALTH INTERVENTIONS

Compliance status: IN = in compliance OUT = not in compliance N/O = not observed N/A = not applicable

Marked in appropriate box for COS and/or R. COS = corrected on-site during inspection R = repeat violation

Risk factors are improper practices or procedures identified as the most prevalent contributing factors of foodborne illness or injury. Public Health Interventions are control measures to prevent foodborne illnesses or injury.

Supervision

1. PIC Present, Knowledge and Duties

2. Certified Food Protection Manager

IN	OUT	N/O	N/A	COS	REPEAT
<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>
<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>

Employee Health / Responding to Contamination Events

3A. Employee Health: PIC Knowledge, Responsibilities & Reporting

3B. Employee Reporting to PIC

4. Proper Use of Restriction & Exclusion

5. Clean-up of Vomiting and Diarrheal Events

IN	OUT	N/O	N/A	COS	REPEAT
<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>
<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>
<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>
<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>

Good Hygienic Practices

6A. Proper eating, tasting, drinking, or tobacco use

6B. Preventing contamination when tasting

IN	OUT	N/O	N/A	COS	REPEAT
<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>
<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>

Inspector \_\_\_\_\_

Acknowledged Receipt : \_\_\_\_\_

## Food Establishment Inspection Report - FDA

### Good Hygienic Practices

7. No discharge from eyes, nose, and mouth

IN	OUT	N/O	N/A	COS	REPEAT
<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>

### Control of Hands as a Vehicle of Contamination

8A. Hands clean & properly washed

<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>
----------------------------------	-----------------------	-----------------------	--	--------------------------	--------------------------

8B. Where to wash, hand antiseptics

<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>
----------------------------------	-----------------------	-----------------------	--	--------------------------	--------------------------

9. No bare hand contact with RTE food or a pre-approved alternative procedure properly allowed

<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
----------------------------------	-----------------------	-----------------------	-----------------------	--------------------------	--------------------------

10A. Adequate handwashing sinks properly supplied and accessible

<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>
----------------------------------	-----------------------	--	--	--------------------------	--------------------------

10B. Handwashing sinks accessible with proper signage, handwashing aids

<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>
----------------------------------	-----------------------	--	--	--------------------------	--------------------------

### Approved Sources

11A. Milk, eggs, juice, bottled water, hermetically sealed food, game animals

<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
----------------------------------	-----------------------	-----------------------	-----------------------	--------------------------	--------------------------

11B. Packaged foods, labeling, whole muscle beef

<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
----------------------------------	-----------------------	-----------------------	-----------------------	--------------------------	--------------------------

11C. Obtaining raw fish, packaged meat & poultry, eggs

<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
----------------------------------	-----------------------	-----------------------	-----------------------	--------------------------	--------------------------

12A. Food received at proper temperature

<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
----------------------------------	-----------------------	-----------------------	-----------------------	--------------------------	--------------------------

12B. Shipping and receiving frozen food

<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
----------------------------------	-----------------------	-----------------------	-----------------------	--------------------------	--------------------------

13. Food in good condition, honestly presented, safe, & unadulterated

<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>
----------------------------------	-----------------------	--	--	--------------------------	--------------------------

13B. Food package integrity

<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>
----------------------------------	-----------------------	--	--	--------------------------	--------------------------

14A. Required records available: shellstock tags, parasite destruction

<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
-----------------------	-----------------------	-----------------------	----------------------------------	--------------------------	--------------------------

14B. Missing shellstock tags, destruction

<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
-----------------------	-----------------------	-----------------------	----------------------------------	--------------------------	--------------------------

14C. Parasite destruction- storing raw/partially cooked fish

<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
-----------------------	-----------------------	-----------------------	----------------------------------	--------------------------	--------------------------

### Protection from Contamination

15A. Food separated & protected

<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
----------------------------------	-----------------------	-----------------------	-----------------------	--------------------------	--------------------------

15B. Cleaning equip/utensils/food containers

<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
----------------------------------	-----------------------	-----------------------	-----------------------	--------------------------	--------------------------

16A. Food-contact surfaces: cleaned & sanitized immersion 171° F and above

<input checked="" type="radio"/>	<input type="radio"/>		<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
----------------------------------	-----------------------	--	-----------------------	--------------------------	--------------------------

16B. Food contact surfaces cleaned and sanitized NMT 194° F, NLT 180° F

<input checked="" type="radio"/>	<input type="radio"/>		<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
----------------------------------	-----------------------	--	-----------------------	--------------------------	--------------------------

16C. Mechanical warewashing equipment sanitization food contact surfaces, equip., utensils

<input type="radio"/>	<input type="radio"/>		<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
-----------------------	-----------------------	--	----------------------------------	--------------------------	--------------------------

17. Proper disposition of returned, previously served reconditions, & unsafe food

<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>
----------------------------------	-----------------------	--	--	--------------------------	--------------------------

### Time/Temperature Control for Safety Food (TCS Food)

18A. Proper cooking time & temperatures

<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
----------------------------------	-----------------------	-----------------------	-----------------------	--------------------------	--------------------------

18B. Whole meat cooking and serving, storing

<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
-----------------------	-----------------------	-----------------------	----------------------------------	--------------------------	--------------------------

18C. Microwave cooking of raw animal foods

<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
-----------------------	-----------------------	-----------------------	----------------------------------	--------------------------	--------------------------

19. Proper reheating procedures for hot holding

<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
-----------------------	-----------------------	-----------------------	----------------------------------	--------------------------	--------------------------

20. Proper cooling time & temperatures

<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
-----------------------	-----------------------	-----------------------	----------------------------------	--------------------------	--------------------------

21. Proper hot holding temperatures

<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
----------------------------------	-----------------------	-----------------------	-----------------------	--------------------------	--------------------------

Inspector \_\_\_\_\_

Acknowledged Receipt : \_\_\_\_\_

Page 2 of 5

## Food Establishment Inspection Report - FDA

### Time/Temperature Control for Safety Food (TCS Food)

	IN	OUT	N/O	N/A	COS	REPEAT
22. Proper cold holding temperatures	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
23. Proper Date Marking	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
23B. TCS Foods Disposition	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
24A. Time as a public health control: procedures	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
24B. Time as a public health control: temperatures & discarding food	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
24C. Time as a public health control: highly susceptible population (HSP)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

### Consumer Advisory

	IN	OUT	N/O	N/A	COS	REPEAT
25. Consumer advisory provided for raw or undercooked foods	<input checked="" type="radio"/>	<input type="radio"/>		<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

### Highly Susceptible Populations (HSP)

	IN	OUT	N/O	N/A	COS	REPEAT
26A. Pasteurized foods used; prohibited foods not offered	<input type="radio"/>	<input type="radio"/>		<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
26B. Reservice of foods	<input type="radio"/>	<input type="radio"/>		<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

### Chemical

	IN	OUT	N/O	N/A	COS	REPEAT
27. Food additives: approved and properly used	<input type="radio"/>	<input type="radio"/>		<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
28A. Toxic substances identified, stored and used	<input checked="" type="radio"/>	<input type="radio"/>		<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
28B. Poisonous materials, sanitizers, additives, medicines restriction, separation, storage	<input checked="" type="radio"/>	<input type="radio"/>		<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
28C. Conditions of Use: law	<input checked="" type="radio"/>	<input type="radio"/>		<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

### Conformance with Approved Procedures

	IN	OUT	N/O	N/A	COS	REPEAT
29A. Compliance with variance, specialized process, & HACCP plan	<input type="radio"/>	<input type="radio"/>		<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
29B. Treating juice- HACCP, reduced oxygen packaging w/out variance, conformance with approved procedures	<input type="radio"/>	<input type="radio"/>		<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
29C. When HACCP plan is required	<input type="radio"/>	<input type="radio"/>		<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

### GOOD RETAIL PRACTICES

Good Retail Practices are preventative measures to control the addition of pathogens, chemicals, and physical objects into foods.

IN = In compliance    OUT = not in compliance    COS - corrected on -site during inspection    REPEAT = repeat violation

### Safe Food and Water

	IN	OUT	N/O	N/A	COS	REPEAT
30. Pasteurized eggs used where required	<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>
31A. Water & ice from approved source	<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>
31B. Sampling, alternative water supply	<input type="radio"/>	<input type="radio"/>		<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
31C. Sampling report	<input type="radio"/>	<input type="radio"/>		<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
32. Variance obtained for specialized processing methods	<input type="radio"/>	<input type="radio"/>		<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

### Food Temperature Control

	IN	OUT	N/O	N/A	COS	REPEAT
33A. Proper cooling methods used; adequate equipment for temperature control	<input type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>

Inspector \_\_\_\_\_

Acknowledged Receipt : \_\_\_\_\_

Page 3 of 5

## Food Establishment Inspection Report - FDA

### Food Temperature Control

	IN	OUT	N/O	N/A	COS	REPEAT
33B. Frozen food	<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>
34. Plant food properly cooked for hot holding	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
35. Approved thawing methods used	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
36A. Thermometers provided and accurate	<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>
36B. Thermometers function properly	<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>

### Food Identification

	IN	OUT	COS	REPEAT
37A. Food properly labeled; original container	<input type="radio"/>	<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

Fail Notes 3-302.12

*Food Storage Containers Identified with Common Name of Food  
[The tomato ketchup had been placed in bottles which were not  
labelled. Food taken from their original container and placed in another  
food storage container must be clearly labelled so as to identify the  
food.]*

37B. Food labels, labeling of ingredients	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
---	----------------------------------	-----------------------	--------------------------	--------------------------

### Prevention of Food Contamination

	IN	OUT	COS	REPEAT
38A. Insects, rodents, & animals not present	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
38B. Handling prohibition, controlling pests, prohibiting animals	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
39A. Contamination prevented during food storage	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
39B. Food display; ice used as an exterior coolant prohibited as an ingredient	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
39C. Consumer self-service operations- utensils and monitoring	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
40A. Personal cleanliness- prohibition jewelry	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
40B. Maintenance of fingernails	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
41. Wiping cloths; properly used and stored	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
42A. Washing Produce - following chemical manufacturers label	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
42B. Washing produce	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
42C. Washing produce- chemicals	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

### Proper Use of Utensils

	IN	OUT	COS	REPEAT
43. In-use utensils; properly stored	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
44. Utensils, equipment & linens; properly stored, dried, and handled	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
45A. Single-use/ single service articles properly stored and used, required	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
45B. Single-use/service articles use limitation, kitchenware and tableware preventing contamination	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
46. Gloves used properly	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

### Utensils, Equipment and Vending

	IN	OUT	COS	REPEAT
47A. Food & non-food contact surfaces cleanable	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
47B. Food contact surfaces /utensils cleanability, molluscan shellfish tanks, consumer self-service	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

Inspector

Acknowledged Receipt :

Page 4 of 5

## Food Establishment Inspection Report - FDA

### Utensils, Equipment and Vending

	IN	OUT	COS	REPEAT
47C. Properly designed characteristics: food and non-food contact surfaces, molluscan shellfish tanks	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
48A. Warewashing facilities: installed, maintained, & used; test strips	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
48B. Operational warewashing machines	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
49. Non-food contact surfaces clean	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

### Physical Facilities

	IN	OUT	N/A	COS	REPEAT
50. Hot & cold water available; adequate pressure	<input checked="" type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>
51A. Plumbing installed; proper backflow devices	<input checked="" type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>
51B. Prohibiting a cross-connection, inspection and servicing system	<input checked="" type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>
51C. Approved system and cleanable fixtures, service sink	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
52A. Sewage and waste water properly disposed	<input checked="" type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>
52B. Grease traps easily accessible for cleaning	<input checked="" type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>
52C. Removing mobile food establishment waste	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
53A. Toilet facilities; properly constructed, supplied, & cleaned	<input checked="" type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>
53B. Toilet tissue availability	<input checked="" type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>
54. Garbage & refuse properly disposed; facilities maintained	<input checked="" type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>
55A. Physical facilities installed, maintained, & clean	<input checked="" type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>
55B. Private homes and living or sleeping quarters, use prohibition	<input checked="" type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>
56. Adequate ventilation & lighting; designated areas used	<input checked="" type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>

### MASSACHUSETTS ONLY REGULATIONS

Rules and Regulations adopted for use in Massachusetts only.

#### Facilities

	IN	OUT	COS	REPEAT
57A. Catering	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
57B. When plans are reviewed, prerequisite for operations- valid permit	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
57C. Contents of plans and specifications, preoperational inspections	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
58. Mobile Food Operations	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
59. Temporary Food Establishments	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
60. Residential Kitchens	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

#### Procedures

	IN	OUT	COS	REPEAT
61. Anti-choking Procedures	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
62. Tobacco Products: Notice and Sale	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
63. Food Allergy Awareness Requirements	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

Inspector \_\_\_\_\_

Acknowledged Receipt : \_\_\_\_\_

Page 5 of 5



City of Newton  
Health and Human Services  
Deborah Youngblood, PhD, Commissioner  
1000 Commonwealth Ave Newton, MA 02459  
(617) 796-1420



Public Health  
Prevent, Promote, Protect

Food Establishment Inspection Report - FDA

Insp Date: 6/4/2018 Business ID: 1N2046  
Business: Angier School  
1697 Beacon St.  
Newton, MA 02468

Inspection: CN000439  
Section: 3  
Phone: 559-9300  
Inspector: 1N11121 Derek Kwok  
Reason: 1-Routine  
Results: No Follow-up R2

Inspection Summary

Official Order for Correction: Based on an inspection today, the items checked indicate violations of 105 CMR 590.000/ 2013 Federal Food Code. This report, when signed below by the Commissioner of Health / Agent constitutes an order by the Commissioner of Health. Failure to correct violations cited in this report may result in suspension or revocation of the food establishment permit and cessation of food establishment operations. If aggrieved by this order, you have the right to a hearing. The request must be in writing and submitted to the Commissioner of Health at the above address within 10 days of receipt of this order.

Est. Type 1 - Food Svc Establis License/Permit # \_\_\_\_\_ Risk Category 02 Risk Level Observed 02 Low

Foodborne Illness Complaint Investigated (All) ☐ Involving More Than Two Persons ☐

FOODBORNE ILLNESS RISK FACTORS AND PUBLIC HEALTH INTERVENTIONS

Compliance status: IN = in compliance OUT = not in compliance N/O = not observed N/A = not applicable

Marked in appropriate box for COS and/or R. COS = corrected on-site during inspection R = repeat violation

Risk factors are improper practices or procedures identified as the most prevalent contributing factors of foodborne illness or injury. Public Health Interventions are control measures to prevent foodborne illnesses or injury.

Supervision

1. PIC Present, Knowledge and Duties
2. Certified Food Protection Manager

IN	OUT	N/O	N/A	COS	REPEAT
<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>
<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>

Employee Health / Responding to Contamination Events

- 3A. Employee Health: PIC Knowledge, Responsibilities & Reporting
- 3B. Employee Reporting to PIC
4. Proper Use of Restriction & Exclusion
5. Clean-up of Vomiting and Diarrheal Events

IN	OUT	N/O	N/A	COS	REPEAT
<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>
<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>
<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>
<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>

Good Hygienic Practices

- 6A. Proper eating, tasting, drinking, or tobacco use
- 6B. Preventing contamination when tasting

IN	OUT	N/O	N/A	COS	REPEAT
<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>
<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>

*[Signature]*

Inspector

Acknowledged Receipt : Newton Public School

Page 1 of 6

## Food Establishment Inspection Report - FDA

### Good Hygienic Practices

7. No discharge from eyes, nose, and mouth

IN	OUT	N/O	N/A	COS	REPEAT
<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>

### Control of Hands as a Vehicle of Contamination

8A. Hands clean & properly washed

<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>
----------------------------------	-----------------------	-----------------------	--	--------------------------	--------------------------

8B. Where to wash, hand antiseptics

<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>
----------------------------------	-----------------------	-----------------------	--	--------------------------	--------------------------

9. No bare hand contact with RTE food or a pre-approved alternative procedure properly allowed

<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
----------------------------------	-----------------------	-----------------------	-----------------------	--------------------------	--------------------------

10A. Adequate handwashing sinks properly supplied and accessible

<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>
----------------------------------	-----------------------	--	--	--------------------------	--------------------------

10B. Handwashing sinks accesible with proper signage, handwashing aids

<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>
----------------------------------	-----------------------	--	--	--------------------------	--------------------------

### Approved Sources

11A. Milk, eggs, juice, bottled water, hermetically sealed food, game animals

<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
----------------------------------	-----------------------	-----------------------	-----------------------	--------------------------	--------------------------

11B. Packaged foods, labeling, whole muscle beef

<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
----------------------------------	-----------------------	-----------------------	-----------------------	--------------------------	--------------------------

11C. Obtaining raw fish, packaged meat & poultry, eggs

<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
----------------------------------	-----------------------	-----------------------	-----------------------	--------------------------	--------------------------

12A. Food received at proper temperature

<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
-----------------------	-----------------------	----------------------------------	-----------------------	--------------------------	--------------------------

12B. Shipping and receiving frozen food

<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
-----------------------	-----------------------	----------------------------------	-----------------------	--------------------------	--------------------------

13. Food in good condition, honestly presented, safe, & unadulterated

<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>
----------------------------------	-----------------------	--	--	--------------------------	--------------------------

13B. Food package integrity

<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>
----------------------------------	-----------------------	--	--	--------------------------	--------------------------

14A. Required records available: shellstock tags, parasite destruction

<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
-----------------------	-----------------------	-----------------------	----------------------------------	--------------------------	--------------------------

14B. Missing shellstock tags, destruction

<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
-----------------------	-----------------------	-----------------------	----------------------------------	--------------------------	--------------------------

14C. Parasite destruction- storing raw/partially cooked fish

<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
-----------------------	-----------------------	-----------------------	----------------------------------	--------------------------	--------------------------

### Protection from Contamination

15A. Food separated & protected

<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
----------------------------------	-----------------------	-----------------------	-----------------------	--------------------------	--------------------------

15B. Cleaning equip/utensils/food containers

<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
----------------------------------	-----------------------	-----------------------	-----------------------	--------------------------	--------------------------

16A. Food-contact surfaces: cleaned & sanitized immersion 171° F and above

<input checked="" type="radio"/>	<input type="radio"/>		<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
----------------------------------	-----------------------	--	-----------------------	--------------------------	--------------------------

16B. Food contact surfaces cleaned and sanitized NMT 194° F, NLT 180° F

<input checked="" type="radio"/>	<input type="radio"/>		<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
----------------------------------	-----------------------	--	-----------------------	--------------------------	--------------------------

16C. Mechanical warewashing equipment sanitization food contact surfaces, equip., utensils

<input checked="" type="radio"/>	<input type="radio"/>		<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
----------------------------------	-----------------------	--	-----------------------	--------------------------	--------------------------

17. Proper disposition of returned, previously served reconditions, & unsafe food

<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>
----------------------------------	-----------------------	--	--	--------------------------	--------------------------

### Time/Temperature Control for Safety Food (TCS Food)

18A. Proper cooking time & temperatures

<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
----------------------------------	-----------------------	-----------------------	-----------------------	--------------------------	--------------------------

18B. Whole meat cooking and serving, storing

<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
-----------------------	-----------------------	-----------------------	----------------------------------	--------------------------	--------------------------

18C. Microwave cooking of raw animal foods

<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
-----------------------	-----------------------	-----------------------	----------------------------------	--------------------------	--------------------------

19. Proper reheating procedures for hot holding

<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
----------------------------------	-----------------------	-----------------------	-----------------------	--------------------------	--------------------------

20. Proper cooling time & temperatures

<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
-----------------------	-----------------------	-----------------------	-----------------------	--------------------------	--------------------------

21. Proper hot holding temperatures

<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
----------------------------------	-----------------------	-----------------------	-----------------------	--------------------------	--------------------------

*Handwritten signature*

Inspector

Acknowledged Receipt : Newton Public School

Page 2 of 6

## Food Establishment Inspection Report - FDA

### Time/Temperature Control for Safety Food (TCS Food)

	IN	OUT	N/O	N/A	COS	REPEAT
22. Proper cold holding temperatures	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
23. Proper Date Marking	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
23B. TCS Foods Disposition	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
24A. Time as a public health control: procedures	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
24B. Time as a public health control: temperatures & discarding food	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
24C. Time as a public health control: highly susceptible population (HSP)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

### Consumer Advisory

	IN	OUT	N/O	N/A	COS	REPEAT
25. Consumer advisory provided for raw or undercooked foods	<input type="radio"/>	<input type="radio"/>		<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

### Highly Susceptible Populations (HSP)

	IN	OUT	N/O	N/A	COS	REPEAT
26A. Pasteurized foods used; prohibited foods not offered	<input type="radio"/>	<input type="radio"/>		<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
26B. Reservice of foods	<input type="radio"/>	<input type="radio"/>		<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

### Chemical

	IN	OUT	N/O	N/A	COS	REPEAT
27. Food additives: approved and properly used	<input type="radio"/>	<input type="radio"/>		<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
28A. Toxic substances identified, stored and used	<input type="radio"/>	<input checked="" type="radio"/>		<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

Fail Notes 7-102.11

*\*Common Name - Working Containers  
[A spray bottle containing glass cleaner was observed not labeled. Working containers used for storing chemicals such as cleaners and sanitizers taken from bulk supplies shall be clearly and individually identified with the common name of the material. Label all containers / spray bottles. Be sure the chemical in the bottle matches the name on the working container (bottle).]*

28B. Poisonous materials, sanitizers, additives, medicines restriction, separation, storage	<input checked="" type="radio"/>	<input type="radio"/>		<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
28C. Conditions of Use: law	<input checked="" type="radio"/>	<input type="radio"/>		<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

### Conformance with Approved Procedures

	IN	OUT	N/O	N/A	COS	REPEAT
29A. Compliance with variance, specialized process, & HACCP plan	<input type="radio"/>	<input type="radio"/>		<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
29B. Treating juice- HACCP, reduced oxygen packaging w/out variance, conformance with approved procedures	<input type="radio"/>	<input type="radio"/>		<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
29C. When HACCP plan is required	<input type="radio"/>	<input type="radio"/>		<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

### GOOD RETAIL PRACTICES

Good Retail Practices are preventative measures to control the addition of pathogens, chemicals, and physical objects into foods.

IN = In compliance OUT = not in compliance COS - corrected on -site during inspection REPEAT = repeat violation

### Safe Food and Water

	IN	OUT	N/O	N/A	COS	REPEAT
30. Pasteurized eggs used where required	<input type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>
31A. Water & ice from approved source	<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>
31B. Sampling, alternative water supply	<input type="radio"/>	<input type="radio"/>		<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

*David R. L.*

Inspector

Acknowledged Receipt : Newton Public School

Page 3 of 6

## Food Establishment Inspection Report - FDA

### Safe Food and Water

31C. Sampling report

IN OUT N/O N/A COS REPEAT  
☐ ☐ ☐ ☐ ☐ ☐

32. Variance obtained for specialized processing methods

☐ ☐ ☐ ☐ ☐ ☐

### Food Temperature Control

33A. Proper cooling methods used; adequate equipment for temperature control

☐ ☐ ☐ ☐ ☐ ☐

33B. Frozen food

☒ ☐ ☐ ☐ ☐ ☐

34. Plant food properly cooked for hot holding

☒ ☐ ☐ ☐ ☐ ☐

35. Approved thawing methods used

☒ ☐ ☐ ☐ ☐ ☐

36A. Thermometers provided and accurate

☒ ☐ ☐ ☐ ☐ ☐

36B. Thermometers function properly

☒ ☐ ☐ ☐ ☐ ☐

### Food Identification

37A. Food properly labeled; original container

IN OUT COS REPEAT  
☒ ☐ ☐ ☐

37B. Food labels, labeling of ingredients

☒ ☐ ☐ ☐

### Prevention of Food Contamination

38A. Insects, rodents, & animals not present

☒ ☐ ☐ ☐

38B. Handling prohibition, controlling pests, prohibiting animals

☒ ☐ ☐ ☐

39A. Contamination prevented during food storage

☒ ☐ ☐ ☐

39B. Food display; ice used as an exterior coolant prohibited as an ingredient

☒ ☐ ☐ ☐

39C. Consumer self-service operations- utensils and monitoring

☒ ☐ ☐ ☐

40A. Personal cleanliness- prohibition jewelry

☒ ☐ ☐ ☐

40B. Maintenance of fingernails

☒ ☐ ☐ ☐

41. Wiping cloths; properly used and stored

☒ ☐ ☐ ☐

42A. Washing Produce - following chemical manufacturers label

☐ ☐ ☐ ☐

42B. Washing produce

☒ ☐ ☐ ☐

42C. Washing produce- chemicals

☐ ☐ ☐ ☐

### Proper Use of Utensils

43. In-use utensils; properly stored

IN OUT COS REPEAT  
☒ ☐ ☐ ☐

44. Utensils, equipment & linens; properly stored, dried, and handled

☒ ☐ ☐ ☐

45A. Single-use/ single service articles properly stored and used, required

☒ ☐ ☐ ☐

45B. Single-use/service articles use limitation, kitchenware and tableware preventing contamination

☒ ☐ ☐ ☐

46. Gloves used properly

☒ ☐ ☐ ☐

### Utensils, Equipment and Vending

47A. Food & non-food contact surfaces cleanable

IN OUT COS REPEAT  
☒ ☐ ☐ ☐

*David K. Lee*

Inspector

Acknowledged Receipt : Newton Public School

Page 4 of 6

## Food Establishment Inspection Report - FDA

### Utensils, Equipment and Vending

	IN	OUT	COS	REPEAT
47B. Food contact surfaces /utensils cleanability, molluscan shellfish tanks, consumer self-service	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
47C. Properly designed characteristics: food and non-food contact surfaces, molluscan shellfish tanks	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
48A. Warewashing facilities: installed, maintained, & used; test strips	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
48B. Operational warewashing machines	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
49. Non-food contact surfaces clean	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

### Physical Facilities

	IN	OUT	N/A	COS	REPEAT
50. Hot & cold water available; adequate pressure	<input checked="" type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>
51A. Plumbing installed; proper backflow devices	<input checked="" type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>
51B. Prohibiting a cross-connection, inspection and servicing system	<input checked="" type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>
51C. Approved system and cleanable fixtures, service sink	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
52A. Sewage and waste water properly disposed	<input checked="" type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>
52B. Grease traps easily accessible for cleaning	<input checked="" type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>
52C. Removing mobile food establishment waste	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
53A. Toilet facilities; properly constructed, supplied, & cleaned	<input checked="" type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>
53B. Toilet tissue availability	<input checked="" type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>
54. Garbage & refuse properly disposed; facilities maintained	<input type="radio"/>	<input checked="" type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>
<i>Fail Notes</i>   5-501.16 <i>Storage Areas, Rooms and Receptacles, Capacity and Availability</i> <i>[A waste receptacle was not observed at the front hand sink.</i> <i>Provide a small trash receptacle at all hand sinks.]</i>					
55A. Physical facilities installed, maintained, & clean	<input checked="" type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>
55B. Private homes and living or sleeping quarters, use prohibition	<input checked="" type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>
56. Adequate ventilation & lighting; designated areas used	<input checked="" type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>

### MASSACHUSETTS ONLY REGULATIONS

Rules and Regulations adopted for use in Massachusetts only.

#### Facilities

	IN	OUT	COS	REPEAT
57A. Catering	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
57B. When plans are reviewed, prerequisite for operations- valid permit	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
57C. Contents of plans and specifications, preoperational inspections	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
58. Mobile Food Operations	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
59. Temporary Food Establishments	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
60. Residential Kitchens	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

#### Procedures

	IN	OUT	COS	REPEAT
61. Anti-choking Procedures	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

*David K. L.*

Inspector

Acknowledged Receipt : Newton Public School

Page 5 of 6

## Food Establishment Inspection Report - FDA

### Procedures

62. Tobacco Products: Notice and Sale

63. Food Allergy Awareness Requirements

IN OUT COS REPEAT

☐ ☐ ☐ ☐

☒ ☐ ☐ ☐



Inspector

Acknowledged Receipt : Newton Public School

Page 6 of 6



**City of Newton**  
**Health and Human Services**  
 Deborah Youngblood, PhD, Commissioner  
 1000 Commonwealth Ave Newton, MA 02459  
 (617) 796-1420



**Public Health**  
 Prevent. Promote. Protect.

**Food Establishment Inspection Report - FDA**

**Insp Date:** 9/20/2018      **Business ID:** 1N2046  
**Business:** Angier School  
 1697 Beacon St.  
 Newton, MA 02468

**Inspection:** 6N000045  
**Section:** 3  
**Phone:** 559-9300  
**Inspector:** 1N11123 Nicola Assan  
**Reason:** 1-Routine  
**Results:** No Follow-up R2

**Inspection Summary**

Official Order for Correction: Based on an inspection today, the items checked indicate violations of 105 CMR 590.000/ 2013 Federal Food Code. This report, when signed below by the Commissioner of Health / Agent constitutes an order by the Commissioner of Health. Failure to correct violations cited in this report may result in suspension or revocation of the food establishment permit and cessation of food establishment operations. If aggrieved by this order, you have the right to a hearing. The request must be in writing and submitted to the Commissioner of Health at the above address within 10 days of receipt of this order.

Est. Type 1 - Food Svc Establis License/Permit # \_\_\_\_\_ Risk Category 02 Risk Level Observed 02 Low

Foodborne Illness Complaint Investigated (All) ☐ Involving More Than Two Persons ☐

**FOODBORNE ILLNESS RISK FACTORS AND PUBLIC HEALTH INTERVENTIONS**

Compliance status: IN = in compliance OUT = not in compliance N/O = not observed N/A = not applicable

Marked in appropriate box for COS and/or R. COS = corrected on-site during inspection R = repeat violation

Risk factors are improper practices or procedures identified as the most prevalent contributing factors of foodborne illness or injury. Public Health Interventions are control measures to prevent foodborne illnesses or injury.

**Supervision**

1. PIC Present, Knowledge and Duties

IN	OUT	N/O	N/A	COS	REPEAT
<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>

2. Certified Food Protection Manager

<input checked="" type="radio"/>	<input type="radio"/>		<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
----------------------------------	-----------------------	--	-----------------------	--------------------------	--------------------------

**Employee Health / Responding to Contamination Events**

3A. Employee Health: PIC Knowledge, Responsibilities & Reporting

<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>
----------------------------------	-----------------------	--	--	--------------------------	--------------------------

3B. Employee Reporting to PIC

<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>
----------------------------------	-----------------------	--	--	--------------------------	--------------------------

4. Proper Use of Restriction & Exclusion

<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>
----------------------------------	-----------------------	--	--	--------------------------	--------------------------

5. Clean-up of Vomiting and Diarrheal Events

<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>
----------------------------------	-----------------------	--	--	--------------------------	--------------------------

**Good Hygienic Practices**

6A. Proper eating, tasting, drinking, or tobacco use

<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>
----------------------------------	-----------------------	-----------------------	--	--------------------------	--------------------------

6B. Preventing contamination when tasting

<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>
----------------------------------	-----------------------	-----------------------	--	--------------------------	--------------------------

*Assan*

Inspector

Acknowledged Receipt : Tim Viveiros

Page 1 of 5

## Food Establishment Inspection Report - FDA

### Good Hygienic Practices

7. No discharge from eyes, nose, and mouth

IN	OUT	N/O	N/A	COS	REPEAT
<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>

### Control of Hands as a Vehicle of Contamination

8A. Hands clean & properly washed

IN	OUT	N/O	N/A	COS	REPEAT
<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>

8B. Where to wash, hand antiseptics

IN	OUT	N/O	N/A	COS	REPEAT
<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>

9. No bare hand contact with RTE food or a pre-approved alternative procedure properly allowed

IN	OUT	N/O	N/A	COS	REPEAT
<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

10A. Adequate handwashing sinks properly supplied and accessible

IN	OUT	N/O	N/A	COS	REPEAT
<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>

10B. Handwashing sinks accesible with proper signage, handwashing aids

IN	OUT	N/O	N/A	COS	REPEAT
<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>

### Approved Sources

11A. Milk, eggs, juice, bottled water, hermetically sealed food, game animals

IN	OUT	N/O	N/A	COS	REPEAT
<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

11B. Packaged foods, labeling, whole muscle beef

IN	OUT	N/O	N/A	COS	REPEAT
<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

11C. Obtaining raw fish, packaged meat & poultry, eggs

IN	OUT	N/O	N/A	COS	REPEAT
<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

12A. Food received at proper temperature

IN	OUT	N/O	N/A	COS	REPEAT
<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

12B. Shipping and receiving frozen food

IN	OUT	N/O	N/A	COS	REPEAT
<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

13. Food in good condition, honestly presented, safe, & unadulterated

IN	OUT	N/O	N/A	COS	REPEAT
<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>

13B. Food package integrity

IN	OUT	N/O	N/A	COS	REPEAT
<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>

14A. Required records available: shellstock tags, parasite destruction

IN	OUT	N/O	N/A	COS	REPEAT
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

14B. Missing shellstock tags, destruction

IN	OUT	N/O	N/A	COS	REPEAT
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

14C. Parasite destruction- storing raw/partially cooked fish

IN	OUT	N/O	N/A	COS	REPEAT
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

### Protection from Contamination

15A. Food separated & protected

IN	OUT	N/O	N/A	COS	REPEAT
<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

15B. Cleaning equip/utensils/food containers

IN	OUT	N/O	N/A	COS	REPEAT
<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

16A. Food-contact surfaces: cleaned & sanitized immersion 171° F and above

IN	OUT	N/O	N/A	COS	REPEAT
<input type="radio"/>	<input checked="" type="radio"/>		<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

Fail Notes 4-501.114 (A-E, F 1&2)

*Chemical Sanitization - Temperature, pH, Concentration and Hardness  
[The concentration of the sanitizing solution in the 3 bay sink was too strong (500 ppm). The concentration of the sanitizing solution must be within the range of 150-400 ppm as per manufacturer's instructions.]*

16B. Food contact surfaces cleaned and sanitized NMT 194° F, NLT 180° F

IN	OUT	N/O	N/A	COS	REPEAT
<input type="radio"/>	<input type="radio"/>		<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

16C. Mechanical warewashing equipment sanitization food contact surfaces, equip., utensils

IN	OUT	N/O	N/A	COS	REPEAT
<input type="radio"/>	<input type="radio"/>		<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

17. Proper disposition of returned, previously served reconditions, & unsafe food

IN	OUT	N/O	N/A	COS	REPEAT
<input type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>

### Time/Temperature Control for Safety Food (TCS Food)

18A. Proper cooking time & temperatures

IN	OUT	N/O	N/A	COS	REPEAT
<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

18B. Whole meat cooking and serving, storing

IN	OUT	N/O	N/A	COS	REPEAT
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

*Assan*

Inspector

Acknowledged Receipt : Tim Viveiros

Page 2 of 5

## Food Establishment Inspection Report - FDA

Time/Temperature Control for Safety Food (TCS Food)	IN	OUT	N/O	N/A	COS	REPEAT
18C. Microwave cooking of raw animal foods	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
19. Proper reheating procedures for hot holding	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
20. Proper cooling time & temperatures	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
21. Proper hot holding temperatures	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
22. Proper cold holding temperatures	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
23. Proper Date Marking	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
23B. TCS Foods Disposition	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
24A. Time as a public health control: procedures	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
24B. Time as a public health control: temperatures & discarding food	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
24C. Time as a public health control: highly susceptible population (HSP)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

Consumer Advisory	IN	OUT	N/O	N/A	COS	REPEAT
25. Consumer advisory provided for raw or undercooked foods	<input type="radio"/>	<input type="radio"/>		<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

Highly Susceptible Populations (HSP)	IN	OUT	N/O	N/A	COS	REPEAT
26A. Pasteurized foods used; prohibited foods not offered	<input type="radio"/>	<input type="radio"/>		<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
26B. Reservice of foods	<input type="radio"/>	<input type="radio"/>		<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

Chemical	IN	OUT	N/O	N/A	COS	REPEAT
27. Food additives: approved and properly used	<input type="radio"/>	<input type="radio"/>		<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
28A. Toxic substances identified, stored and used	<input checked="" type="radio"/>	<input type="radio"/>		<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
28B. Poisonous materials, sanitizers, additives, medicines restriction, separation, storage	<input checked="" type="radio"/>	<input type="radio"/>		<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
28C. Conditions of Use: law	<input checked="" type="radio"/>	<input type="radio"/>		<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

Conformance with Approved Procedures	IN	OUT	N/O	N/A	COS	REPEAT
29A. Compliance with variance, specialized process, & HACCP plan	<input type="radio"/>	<input type="radio"/>		<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
29B. Treating juice- HACCP, reduced oxygen packaging w/out variance, conformance with approved procedures	<input type="radio"/>	<input type="radio"/>		<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
29C. When HACCP plan is required	<input type="radio"/>	<input type="radio"/>		<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

### GOOD RETAIL PRACTICES

Good Retail Practices are preventative measures to control the addition of pathogens, chemicals, and physical objects into foods.

IN = In compliance    OUT = not in compliance    COS - corrected on -site during inspection    REPEAT = repeat violation

Safe Food and Water	IN	OUT	N/O	N/A	COS	REPEAT
30. Pasteurized eggs used where required	<input type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>
31A. Water & ice from approved source	<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>
31B. Sampling, alternative water supply	<input type="radio"/>	<input type="radio"/>		<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

*Assan*

Inspector

Acknowledged Receipt : Tim Viveiros

Page 3 of 5

## Food Establishment Inspection Report - FDA

Safe Food and Water	IN	OUT	N/O	N/A	COS	REPEAT
31C. Sampling report	<input type="radio"/>	<input type="radio"/>		<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
32. Variance obtained for specialized processing methods	<input type="radio"/>	<input type="radio"/>		<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
Food Temperature Control	IN	OUT	N/O	N/A	COS	REPEAT
33A. Proper cooling methods used; adequate equipment for temperature control	<input type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>
33B. Frozen food	<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>
34. Plant food properly cooked for hot holding	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
35. Approved thawing methods used	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
36A. Thermometers provided and accurate	<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>
36B. Thermometers function properly	<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>
Food Identification	IN	OUT	COS	REPEAT		
37A. Food properly labeled; original container		<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>	
37B. Food labels, labeling of ingredients		<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Prevention of Food Contamination	IN	OUT	COS	REPEAT		
38A. Insects, rodents, & animals not present		<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>	
38B. Handling prohibition, controlling pests, prohibiting animals		<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>	
39A. Contamination prevented during food storage		<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>	
39B. Food display; ice used as an exterior coolant prohibited as an ingredient		<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>	
39C. Consumer self-service operations- utensils and monitoring		<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>	
40A. Personal cleanliness- prohibition jewelry		<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>	
40B. Maintenance of fingernails		<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>	
41. Wiping cloths; properly used and stored		<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>	
42A. Washing Produce - following chemical manufacturers label		<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>	
42B. Washing produce		<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>	
42C. Washing produce- chemicals		<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Proper Use of Utensils	IN	OUT	COS	REPEAT		
43. In-use utensils; properly stored		<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>	
44. Utensils, equipment & linens; properly stored, dried, and handled		<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>	
45A. Single-use/ single service articles properly stored and used, required		<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>	
45B. Single-use/service articles use limitation, kitchenware and tableware preventing contamination		<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>	
46. Gloves used properly		<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Utensils, Equipment and Vending	IN	OUT	COS	REPEAT		
47A. Food & non-food contact surfaces cleanable		<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>	

*Assan*

Inspector

Acknowledged Receipt : Tim Viveiros

Page 4 of 5

## Food Establishment Inspection Report - FDA

### Utensils, Equipment and Vending

	IN	OUT	COS	REPEAT
47B. Food contact surfaces /utensils cleanability, molluscan shellfish tanks, consumer self-service	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
47C. Properly designed characteristics: food and non-food contact surfaces, molluscan shellfish tanks	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
48A. Warewashing facilities: installed, maintained, & used; test strips	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
48B. Operational warewashing machines	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
49. Non-food contact surfaces clean	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

### Physical Facilities

	IN	OUT	N/A	COS	REPEAT
50. Hot & cold water available; adequate pressure	<input checked="" type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>
51A. Plumbing installed; proper backflow devices	<input checked="" type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>
51B. Prohibiting a cross-connection, inspection and servicing system	<input checked="" type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>
51C. Approved system and cleanable fixtures, service sink	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
52A. Sewage and waste water properly disposed	<input checked="" type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>
52B. Grease traps easily accessible for cleaning	<input checked="" type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>
52C. Removing mobile food establishment waste	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
53A. Toilet facilities; properly constructed, supplied, & cleaned	<input checked="" type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>
53B. Toilet tissue availability	<input checked="" type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>
54. Garbage & refuse properly disposed; facilities maintained	<input checked="" type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>
55A. Physical facilities installed, maintained, & clean	<input checked="" type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>
55B. Private homes and living or sleeping quarters, use prohibition	<input checked="" type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>
56. Adequate ventilation & lighting; designated areas used	<input checked="" type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>

### MASSACHUSETTS ONLY REGULATIONS

Rules and Regulations adopted for use in Massachusetts only.

#### Facilities

	IN	OUT	COS	REPEAT
57A. Catering	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
57B. When plans are reviewed, prerequisite for operations- valid permit	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
57C. Contents of plans and specifications, preoperational inspections	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
58. Mobile Food Operations	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
59. Temporary Food Establishments	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
60. Residential Kitchens	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

#### Procedures

	IN	OUT	COS	REPEAT
61. Anti-choking Procedures	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
62. Tobacco Products: Notice and Sale	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
63. Food Allergy Awareness Requirements	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

*Assan*

Inspector

Acknowledged Receipt : Tim Viveiros

Page 5 of 5



City of Newton  
Health and Human Services  
Deborah Youngblood, PhD, Commissioner  
1000 Commonwealth Ave Newton, MA 02459  
(617) 796-1420



Public Health  
Prevent. Promote. Protect.

Food Establishment Inspection Report - FDA

Insp Date: 5/13/2019 Business ID: 1N2046  
Business: Angier School  
1697 Beacon St.

Newton, MA 02468

Inspection: 6N000118  
Section: 3  
Phone: 559-9300  
Inspector: 1N11123 Nicola Assan  
Reason: 1-Routine  
Results: No Follow-up R2

Inspection Summary

Official Order for Correction: Based on an inspection today, the items checked indicate violations of 105 CMR 590.000/ 2013 Federal Food Code. This report, when signed below by the Commissioner of Health / Agent constitutes an order by the Commissioner of Health. Failure to correct violations cited in this report may result in suspension or revocation of the food establishment permit and cessation of food establishment operations. If aggrieved by this order, you have the right to a hearing. The request must be in writing and submitted to the Commissioner of Health at the above address within 10 days of receipt of this order.

Est. Type 1 - Food Svc Establis License/Permit # \_\_\_\_\_ Risk Category 02 Risk Level Observed 02 Low

Foodborne Illness Complaint Investigated (All) ☐ Involving More Than Two Persons ☐

FOODBORNE ILLNESS RISK FACTORS AND PUBLIC HEALTH INTERVENTIONS

Compliance status: IN = in compliance OUT = not in compliance N/O = not observed N/A = not applicable

Marked in appropriate box for COS and/or R. COS = corrected on-site during inspection R = repeat violation

Risk factors are improper practices or procedures identified as the most prevalent contributing factors of foodborne illness or injury. Public Health Interventions are control measures to prevent foodborne illnesses or injury.

Supervision

1. PIC Present, Knowledge and Duties

IN	OUT	N/O	N/A	COS	REPEAT
<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>

2. Certified Food Protection Manager

<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>
----------------------------------	-----------------------	-----------------------	--	--------------------------	--------------------------

Employee Health / Responding to Contamination Events

3A. Employee Health: PIC Knowledge, Responsibilities & Reporting

<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>
----------------------------------	-----------------------	--	--	--------------------------	--------------------------

3B. Employee Reporting to PIC

<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>
----------------------------------	-----------------------	--	--	--------------------------	--------------------------

4. Proper Use of Restriction & Exclusion

<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>
----------------------------------	-----------------------	--	--	--------------------------	--------------------------

5. Clean-up of Vomiting and Diarrheal Events

<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>
----------------------------------	-----------------------	--	--	--------------------------	--------------------------

Good Hygienic Practices

6A. Proper eating, tasting, drinking, or tobacco use

<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>
----------------------------------	-----------------------	-----------------------	--	--------------------------	--------------------------

6B. Preventing contamination when tasting

<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>
----------------------------------	-----------------------	-----------------------	--	--------------------------	--------------------------

*Assan*

Inspector

Acknowledged Receipt : Tim Viveiros

Page 1 of 5

## Food Establishment Inspection Report - FDA

### Good Hygienic Practices

7. No discharge from eyes, nose, and mouth

IN	OUT	N/O	N/A	COS	REPEAT
<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>

### Control of Hands as a Vehicle of Contamination

8A. Hands clean & properly washed

<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>
----------------------------------	-----------------------	-----------------------	--	--------------------------	--------------------------

8B. Where to wash, hand antiseptics

<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>
----------------------------------	-----------------------	-----------------------	--	--------------------------	--------------------------

9. No bare hand contact with RTE food or a pre-approved alternative procedure properly allowed

<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
----------------------------------	-----------------------	-----------------------	-----------------------	--------------------------	--------------------------

10A. Adequate handwashing sinks properly supplied and accessible

<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>
----------------------------------	-----------------------	--	--	--------------------------	--------------------------

10B. Handwashing sinks accessible with proper signage, handwashing aids

<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>
----------------------------------	-----------------------	--	--	--------------------------	--------------------------

### Approved Sources

11A. Milk, eggs, juice, bottled water, hermetically sealed food, game animals

<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
----------------------------------	-----------------------	-----------------------	-----------------------	--------------------------	--------------------------

11B. Packaged foods, labeling, whole muscle beef

<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
-----------------------	-----------------------	-----------------------	-----------------------	--------------------------	--------------------------

11C. Obtaining raw fish, packaged meat & poultry, eggs

<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
-----------------------	-----------------------	-----------------------	----------------------------------	--------------------------	--------------------------

12A. Food received at proper temperature

<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
-----------------------	-----------------------	----------------------------------	-----------------------	--------------------------	--------------------------

12B. Shipping and receiving frozen food

<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
-----------------------	-----------------------	----------------------------------	-----------------------	--------------------------	--------------------------

13. Food in good condition, honestly presented, safe, & unadulterated

<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>
----------------------------------	-----------------------	--	--	--------------------------	--------------------------

13B. Food package integrity

<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>
----------------------------------	-----------------------	--	--	--------------------------	--------------------------

14A. Required records available: shellstock tags, parasite destruction

<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
-----------------------	-----------------------	-----------------------	----------------------------------	--------------------------	--------------------------

14B. Missing shellstock tags, destruction

<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
-----------------------	-----------------------	-----------------------	----------------------------------	--------------------------	--------------------------

14C. Parasite destruction- storing raw/partially cooked fish

<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
-----------------------	-----------------------	-----------------------	----------------------------------	--------------------------	--------------------------

### Protection from Contamination

15A. Food separated & protected

<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
----------------------------------	-----------------------	-----------------------	-----------------------	--------------------------	--------------------------

15B. Cleaning equip/utensils/food containers

<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
----------------------------------	-----------------------	-----------------------	-----------------------	--------------------------	--------------------------

16A. Food-contact surfaces: cleaned & sanitized immersion 171° F and above

<input checked="" type="radio"/>	<input type="radio"/>		<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
----------------------------------	-----------------------	--	-----------------------	--------------------------	--------------------------

16B. Food contact surfaces cleaned and sanitized NMT 194° F, NLT 180° F

<input checked="" type="radio"/>	<input type="radio"/>		<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
----------------------------------	-----------------------	--	-----------------------	--------------------------	--------------------------

16C. Mechanical warewashing equipment sanitization food contact surfaces, equip., utensils

<input checked="" type="radio"/>	<input type="radio"/>		<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
----------------------------------	-----------------------	--	-----------------------	--------------------------	--------------------------

17. Proper disposition of returned, previously served reconditions, & unsafe food

<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>
----------------------------------	-----------------------	--	--	--------------------------	--------------------------

### Time/Temperature Control for Safety Food (TCS Food)

18A. Proper cooking time & temperatures

<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
-----------------------	-----------------------	----------------------------------	-----------------------	--------------------------	--------------------------

18B. Whole meat cooking and serving, storing

<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
-----------------------	-----------------------	-----------------------	----------------------------------	--------------------------	--------------------------

18C. Microwave cooking of raw animal foods

<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
-----------------------	-----------------------	-----------------------	----------------------------------	--------------------------	--------------------------

19. Proper reheating procedures for hot holding

<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
-----------------------	-----------------------	----------------------------------	-----------------------	--------------------------	--------------------------

20. Proper cooling time & temperatures

<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
-----------------------	-----------------------	----------------------------------	-----------------------	--------------------------	--------------------------

21. Proper hot holding temperatures

<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
----------------------------------	-----------------------	-----------------------	-----------------------	--------------------------	--------------------------

*Assan*

Inspector

Acknowledged Receipt : Tim Viveiros

Page 2 of 5

## Food Establishment Inspection Report - FDA

Time/Temperature Control for Safety Food (TCS Food)	IN	OUT	N/O	N/A	COS	REPEAT
22. Proper cold holding temperatures	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
23. Proper Date Marking	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
23B. TCS Foods Disposition	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
24A. Time as a public health control: procedures	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
24B. Time as a public health control: temperatures & discarding food	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
24C. Time as a public health control: highly susceptible population (HSP)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

Consumer Advisory	IN	OUT	N/O	N/A	COS	REPEAT
25. Consumer advisory provided for raw or undercooked foods	<input type="radio"/>	<input type="radio"/>		<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

Highly Susceptible Populations (HSP)	IN	OUT	N/O	N/A	COS	REPEAT
26A. Pasteurized foods used; prohibited foods not offered	<input type="radio"/>	<input type="radio"/>		<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
26B. Reservice of foods	<input type="radio"/>	<input type="radio"/>		<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

Chemical	IN	OUT	N/O	N/A	COS	REPEAT
27. Food additives: approved and properly used	<input type="radio"/>	<input type="radio"/>		<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
28A. Toxic substances identified, stored and used	<input checked="" type="radio"/>	<input type="radio"/>		<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
28B. Poisonous materials, sanitizers, additives, medicines restriction, separation, storage	<input checked="" type="radio"/>	<input type="radio"/>		<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
28C. Conditions of Use: law	<input checked="" type="radio"/>	<input type="radio"/>		<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

Conformance with Approved Procedures	IN	OUT	N/O	N/A	COS	REPEAT
29A. Compliance with variance, specialized process, & HACCP plan	<input type="radio"/>	<input type="radio"/>		<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
29B. Treating juice- HACCP, reduced oxygen packaging w/out variance, conformance with approved procedures	<input type="radio"/>	<input type="radio"/>		<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
29C. When HACCP plan is required	<input type="radio"/>	<input type="radio"/>		<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

### GOOD RETAIL PRACTICES

Good Retail Practices are preventative measures to control the addition of pathogens, chemicals, and physical objects into foods.

IN = In compliance   OUT = not in compliance   COS - corrected on -site during inspection   REPEAT = repeat violation

Safe Food and Water	IN	OUT	N/O	N/A	COS	REPEAT
30. Pasteurized eggs used where required	<input type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>
31A. Water & ice from approved source	<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>
31B. Sampling, alternative water supply	<input type="radio"/>	<input type="radio"/>		<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
31C. Sampling report	<input type="radio"/>	<input type="radio"/>		<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
32. Variance obtained for specialized processing methods	<input type="radio"/>	<input type="radio"/>		<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

Food Temperature Control	IN	OUT	N/O	N/A	COS	REPEAT
33A. Proper cooling methods used; adequate equipment for temperature control	<input type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>

*Assan*

Inspector

Acknowledged Receipt : Tim Viveiros

Page 3 of 5

## Food Establishment Inspection Report - FDA

### Food Temperature Control

	IN	OUT	N/O	N/A	COS	REPEAT
33B. Frozen food	<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>
34. Plant food properly cooked for hot holding	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
35. Approved thawing methods used	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
36A. Thermometers provided and accurate	<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>
36B. Thermometers function properly	<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>

### Food Identification

	IN	OUT	COS	REPEAT
37A. Food properly labeled; original container	<input type="radio"/>	<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

*Fail Notes*    3-302.12    *Food Storage Containers Identified with Common Name of Food*  
*[There were squeeze bottles of ketchup and mayonnaise (in the walk-in refrigerator) that were not labeled. Except for containers holding food that can be readily and unmistakably recognized such as dry pasta, working containers holding food or food ingredients that are removed from their original packages for use in the food establishment, such as cooking oils, flour, herbs, potato flakes, salt, spices and sugar shall be identified with the common name of the food.]*

37B. Food labels, labeling of ingredients	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
---	----------------------------------	-----------------------	--------------------------	--------------------------

### Prevention of Food Contamination

	IN	OUT	COS	REPEAT
38A. Insects, rodents, & animals not present	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
38B. Handling prohibition, controlling pests, prohibiting animals	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
39A. Contamination prevented during food storage	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
39B. Food display; ice used as an exterior coolant prohibited as an ingredient	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
39C. Consumer self-service operations- utensils and monitoring	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
40A. Personal cleanliness- prohibition jewelry	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
40B. Maintenance of fingernails	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
41. Wiping cloths; properly used and stored	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
42A. Washing Produce - following chemical manufacturers label	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
42B. Washing produce	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
42C. Washing produce- chemicals	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

### Proper Use of Utensils

	IN	OUT	COS	REPEAT
43. In-use utensils; properly stored	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
44. Utensils, equipment & linens; properly stored, dried, and handled	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
45A. Single-use/ single service articles properly stored and used, required	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
45B. Single-use/service articles use limitation, kitchenware and tableware preventing contamination	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
46. Gloves used properly	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

### Utensils, Equipment and Vending

	IN	OUT	COS	REPEAT
47A. Food & non-food contact surfaces cleanable	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

*Assan*

Inspector

Acknowledged Receipt : Tim Viveiros

Page 4 of 5

## Food Establishment Inspection Report - FDA

### Utensils, Equipment and Vending

	IN	OUT	COS	REPEAT
47B. Food contact surfaces /utensils cleanability, molluscan shellfish tanks, consumer self-service	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
47C. Properly designed characteristics: food and non-food contact surfaces, molluscan shellfish tanks	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
48A. Warewashing facilities: installed, maintained, & used; test strips	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
48B. Operational warewashing machines	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
49. Non-food contact surfaces clean	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

### Physical Facilities

	IN	OUT	N/A	COS	REPEAT
50. Hot & cold water available; adequate pressure	<input checked="" type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>
51A. Plumbing installed; proper backflow devices	<input checked="" type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>
51B. Prohibiting a cross-connection, inspection and servicing system	<input checked="" type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>
51C. Approved system and cleanable fixtures, service sink	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
52A. Sewage and waste water properly disposed	<input checked="" type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>
52B. Grease traps easily accessible for cleaning	<input checked="" type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>
52C. Removing mobile food establishment waste	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
53A. Toilet facilities; properly constructed, supplied, & cleaned	<input checked="" type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>
53B. Toilet tissue availability	<input checked="" type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>
54. Garbage & refuse properly disposed; facilities maintained	<input checked="" type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>
55A. Physical facilities installed, maintained, & clean	<input checked="" type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>
55B. Private homes and living or sleeping quarters, use prohibition	<input checked="" type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>
56. Adequate ventilation & lighting; designated areas used	<input checked="" type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>

### MASSACHUSETTS ONLY REGULATIONS

Rules and Regulations adopted for use in Massachusetts only.

#### Facilities

	IN	OUT	COS	REPEAT
57A. Catering	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
57B. When plans are reviewed, prerequisite for operations- valid permit	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
57C. Contents of plans and specifications, preoperational inspections	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
58. Mobile Food Operations	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
59. Temporary Food Establishments	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
60. Residential Kitchens	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

#### Procedures

	IN	OUT	COS	REPEAT
61. Anti-choking Procedures	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
62. Tobacco Products: Notice and Sale	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
63. Food Allergy Awareness Requirements	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

*Assan*

Inspector

Acknowledged Receipt : Tim Viveiros

Page 5 of 5



City of Newton  
Health and Human Services  
Deborah Youngblood, PhD, Commissioner  
1000 Commonwealth Ave Newton, MA 02459  
(617) 796-1420



Public Health  
Prevent, Promote, Protect

Food Establishment Inspection Report - FDA

Insp Date: 11/25/2016 Business ID: 1N2067

Business: Bigelow Middle School  
42 Vernon St.

Newton, MA 02458

Inspection: 5N000256

Section: 1

Phone: 617-559-7436

Inspector: 1N81219 Kyle Simpson

Reason: 1-Routine

Results: No Follow-up

Inspection Summary

Official Order for Correction: Based on an inspection today, the items checked indicate violations of 105 CMR 590.000/ 2009 Federal Food Code. This report, when signed below by the Commissioner of Health / Agent constitutes an order by the Commissioner of Health. Failure to correct violations cited in this report may result in suspension or revocation of the food establishment permit and cessation of food establishment operations. If aggrieved by this order, you have the right to a hearing. The request must be in writing and submitted to the Commissioner of Health at the above address within 10 days of receipt of this order.

Est. Type 1 - Food Svc Establish License/Permit # \_\_\_\_\_ Risk Category 02 Risk Level Observed 02 Low

FOODBORNE ILLNESS RISK FACTORS AND PUBLIC HEALTH INTERVENTIONS

Compliance status: IN = in compliance OUT = not in compliance N/O = not observed N/A = not applicable

Marked in appropriate box for COS and/or R. COS = corrected on-site during inspection R = repeat violation

Risk factors are improper practices or procedures identified as the most prevalent contributing factors of foodborne illness or injury. Public Health Interventions are control measures to prevent foodborne illnesses or injury.

Supervision	IN	OUT	N/O	N/A	COS	REPEAT
1A. PIC Present	<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>
B. Cert. food manager, knowledge, no critical violations	<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>
C. Duties of PIC	<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>
Employee Health	IN	OUT	N/O	N/A	COS	REPEAT
2. Management, food employee and conditional employee; knowledge, responsibilities and reporting	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
3. Proper use of restriction and exclusion	<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>
Good Hygienic Practices	IN	OUT	N/O	N/A	COS	REPEAT
4A. Proper eating, tasting, drinking, or tobacco use	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>
B. Preventing contamination when tasting	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>
5. No discharge from eyes, nose, and mouth	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>

Inspector

Acknowledged Receipt : Antonio

Page 1 of 5

## Food Establishment Inspection Report - FDA

Preventing Contamination by Hands		IN	OUT	N/O	N/A	COS	REPEAT
6A. Hands clean & properly washed		<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>
B. Where to wash, hand antiseptics		<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>
7. No bare hand contact with RTE food or a pre-approved alternative procedure properly allowed		<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
8A. Adequate handwashing sinks properly supplied and accessible		<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>
B. Handwashing sinks accesible with proper signage, handwashing aids		<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>
C. Conveniently located handwashing sink		<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>
Approved Sources		IN	OUT	N/O	N/A	COS	REPEAT
9A. Milk, eggs, juice, bottled water, hermetically sealed food		<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>
B. Fish and shellfish		<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
10. Food received at proper temperature		<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
11. Food in good condition, safe, & unadulterated		<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>
Protection from Contamination		IN	OUT	N/O	N/A	COS	REPEAT
12A. Food separated & protected		<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
B. Gloves, use limitation, one task- contaminated		<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
13A. Food-contact surfaces: cleaned & sanitized 171° F		<input type="radio"/>	<input checked="" type="radio"/>		<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
Fail Notes	4-702.11 <i>*Frequency of Sanitization of Utensils and Food-Contact Surfaces of Equipment            [An employee was observed just dipping items in sanitizer. Make sure the contact time is being met. The can opener was dirty. Clean and sanitize.]</i>						
B. Food contact surfaces cleaned and sanitized NMT 194° F, NLT 180° F		<input checked="" type="radio"/>	<input type="radio"/>		<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
C. Mechanical warewashing equipment sanitization food contact surfaces, equip., utensils		<input checked="" type="radio"/>	<input type="radio"/>		<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
14. Proper disposition of returned, previously served reconditions, & unsafe food		<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>
Potentially Hazardous Food Time/Temperature		IN	OUT	N/O	N/A	COS	REPEAT
15. Proper cooking time & temperatures		<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
16. Proper reheating procedures for hot holding		<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
17. Proper cooling time & temperatures		<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
18. Proper hot holding temperatures		<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
19. Proper cold holding temperatures		<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
20. Time as a public health control: procedures & record		<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
Highly Susceptible Populations		IN	OUT	N/O	N/A	COS	REPEAT
21. Pasteurized foods used; prohibited foods not offered		<input type="radio"/>	<input type="radio"/>		<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
Chemical		IN	OUT	N/O	N/A	COS	REPEAT
22. Food additives: approved and properly used		<input type="radio"/>	<input type="radio"/>		<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

*Thyler L*

Inspector

Acknowledged Receipt : Antonio

Page 2 of 5

## Food Establishment Inspection Report - FDA

### Chemical

	IN	OUT	N/O	N/A	COS	REPEAT
23A. Toxic substances properly identified, stored and used	<input checked="" type="radio"/>	<input type="radio"/>		<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
B. Restriction presence and use, restriction and storage of medicines	<input checked="" type="radio"/>	<input type="radio"/>		<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
C. Storage- other personal care items	<input type="radio"/>	<input checked="" type="radio"/>		<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

*Fail Notes*    7-209.11    *Separation (poisonous or toxic material)*  
*[Employee items were stored in a rack with wares. The stereo is stored on a shelf above wares. Store personal items away from wares.]*

### GOOD RETAIL PRACTICES

Good Retail Practices are preventative measures to control the addition of pathogens, chemicals, and physical objects into foods.

IN = In compliance    OUT = not in compliance    COS - corrected on -site during inspection    REPEAT = repeat violation

### Safe Food and Water

	IN	OUT	N/O	N/A	COS	REPEAT
24. Water & ice from approved source	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

### Food Temperature Control

	IN	OUT	N/O	N/A	COS	REPEAT
25A. Proper cooling methods used; adequate equipment for temperature control	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
B. Frozen food	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
26. Plant food properly cooked for hot holding	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
27. Approved thawing methods used	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
28A. Thermometers provided and accurate	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
B. Thermometers function properly	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

### Food Identification

	IN	OUT	COS	REPEAT
29A. Food properly labeled; original container	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
B. Food labels, labeling of ingredients	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

### Prevention of Food Contamination

	IN	OUT	COS	REPEAT
30A. Insects, rodents, & animals not present	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
B. Handling prohibition, controlling pests, prohibiting animals	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
31A. Contamination prevented during food storage	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
B. Food display; ice used as an exterior coolant prohibited as an ingredient	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
C. Consumer self-service operations- utensils and monitoring	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
32A. Personal cleanliness- prohibition jewelry	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
B. Maintenance of fingernails	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
33. Wiping cloths; properly used and stored	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
34. Washing fruits & vegetables	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

### Proper Use of Utensils

	IN	OUT	COS	REPEAT
35. In-use utensils; properly stored	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

*[Signature]*

Inspector

Acknowledged Receipt : Antonio

Page 3 of 5

## Food Establishment Inspection Report - FDA

### Proper Use of Utensils

- |   |                                  |                                  |                          |                          |
|---|----------------------------------|----------------------------------|--------------------------|--------------------------|
| 36. Utensils, equipment & linens; properly stored, dried, and handled                             | IN                               | OUT                              | COS                      | REPEAT                   |
|   | <input checked="" type="radio"/> | <input type="radio"/>            | <input type="checkbox"/> | <input type="checkbox"/> |
| 37A. Single-use/ single service articles properly stored and used, required                       | <input checked="" type="radio"/> | <input type="radio"/>            | <input type="checkbox"/> | <input type="checkbox"/> |
| B. Single-use/service articles use limitation, kitchenware and tableware preventing contamination | <input type="radio"/>            | <input checked="" type="radio"/> | <input type="checkbox"/> | <input type="checkbox"/> |

*Fail Notes*    4-903.11 (A&C)    *Equipment, Utensils, Linens and Single-Service and Single-Use Articles-Storing*  
*[Single serve items are not stored inverted. Store so that the food contact surface is not open to contamination.]*

- |                          |                                  |                       |                          |                          |
|--------------------------|----------------------------------|-----------------------|--------------------------|--------------------------|
| 38. Gloves used properly | IN                               | OUT                   | COS                      | REPEAT                   |
|                          | <input checked="" type="radio"/> | <input type="radio"/> | <input type="checkbox"/> | <input type="checkbox"/> |

### Utensils, Equipment and Vending

- |   |                                  |                       |                          |                          |
|---|----------------------------------|-----------------------|--------------------------|--------------------------|
| 39A. Food & non-food contact surfaces cleanable   | IN                               | OUT                   | COS                      | REPEAT                   |
|   | <input checked="" type="radio"/> | <input type="radio"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| B. Food contact surfaces /utensils cleanability, molluscan shellfish tanks, consumer self-service   | <input checked="" type="radio"/> | <input type="radio"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| C. Properly designed characteristics: food and non-food contact surfaces, molluscan shellfish tanks | <input checked="" type="radio"/> | <input type="radio"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 40A. Warewashing facilities: installed, maintained, & used; test strips                             | <input checked="" type="radio"/> | <input type="radio"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| B. Operational warewashing machines   | <input checked="" type="radio"/> | <input type="radio"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 41. Non-food contact surfaces clean   | <input checked="" type="radio"/> | <input type="radio"/> | <input type="checkbox"/> | <input type="checkbox"/> |

### Physical Facilities

- |   |                                  |                                  |     |     |                          |                          |
|---|----------------------------------|----------------------------------|-----|-----|--------------------------|--------------------------|
| 42. Hot & cold water available; adequate pressure                                       | IN                               | OUT                              | N/O | N/A | COS                      | REPEAT                   |
|   | <input checked="" type="radio"/> | <input type="radio"/>            |     |     | <input type="checkbox"/> | <input type="checkbox"/> |
| 43A. Plumbing installed; proper backflow devices  | <input checked="" type="radio"/> | <input type="radio"/>            |     |     | <input type="checkbox"/> | <input type="checkbox"/> |
| B. Prohibiting a cross-connection, non-drinking water, system maintained in good repair | <input type="radio"/>            | <input checked="" type="radio"/> |     |     | <input type="checkbox"/> | <input type="checkbox"/> |
- Fail Notes*    5-205.15 (B)    *System maintained in good repair*  
*[The 3-bay sink is leaking by the grease trap. The grease trap is in really bad condition. Have the system fixed.]*
- |   |                                  |                       |     |     |                          |                          |
|---|----------------------------------|-----------------------|-----|-----|--------------------------|--------------------------|
| C. Approved system and cleanable fixtures, service sink           | IN                               | OUT                   | N/O | N/A | COS                      | REPEAT                   |
|   | <input checked="" type="radio"/> | <input type="radio"/> |     |     | <input type="checkbox"/> | <input type="checkbox"/> |
| 44A. Sewage and waste water properly disposed                     | <input checked="" type="radio"/> | <input type="radio"/> |     |     | <input type="checkbox"/> | <input type="checkbox"/> |
| B. Grease traps easily accessible for cleaning                    | <input checked="" type="radio"/> | <input type="radio"/> |     |     | <input type="checkbox"/> | <input type="checkbox"/> |
| 45A. Toilet facilities; properly constructed, supplied, & cleaned | <input checked="" type="radio"/> | <input type="radio"/> |     |     | <input type="checkbox"/> | <input type="checkbox"/> |
| B. Toilet tissue availability                                     | <input checked="" type="radio"/> | <input type="radio"/> |     |     | <input type="checkbox"/> | <input type="checkbox"/> |
| 46. Garbage & refuse properly disposed; facilities maintained     | <input checked="" type="radio"/> | <input type="radio"/> |     |     | <input type="checkbox"/> | <input type="checkbox"/> |
| 47A. Physical facilities installed, maintained, & clean           | <input checked="" type="radio"/> | <input type="radio"/> |     |     | <input type="checkbox"/> | <input type="checkbox"/> |
| B. Cleaning maintenance tools, preventing contamination           | <input checked="" type="radio"/> | <input type="radio"/> |     |     | <input type="checkbox"/> | <input type="checkbox"/> |
| 48. Adequate ventilation & lighting; designated areas used        | <input checked="" type="radio"/> | <input type="radio"/> |     |     | <input type="checkbox"/> | <input type="checkbox"/> |

### MASSACHUSETTS ONLY REGULATIONS

Rules and Regulations adopted for use in Massachusetts only.

### Facilities

IN OUT COS REPEAT

Inspector

Acknowledged Receipt : Antonio

Page 4 of 5

## Food Establishment Inspection Report - FDA

### Facilities

49A. When plans are reviewed, prerequisite for operations- valid permit

IN OUT COS REPEAT

☐ ☐ ☐ ☐

B. Contents of plans and specifications, preoperational inspections

☐ ☐ ☐ ☐

### Procedures

50. Anti-choking Procedures

IN OUT COS REPEAT

☐ ☐ ☐ ☐

51. Tobacco Products: Notice and Sale

☐ ☐ ☐ ☐



Inspector

Acknowledged Receipt : Antonio

Page 5 of 5



City of Newton  
Health and Human Services  
Deborah Youngblood, PhD, Commissioner  
1000 Commonwealth Ave Newton, MA 02459  
(617) 796-1420



Public Health  
Prevent. Promote. Protect.

Food Establishment Inspection Report - FDA

Insp Date: 11/21/2017 Business ID: 1N2067  
Business: Bigelow Middle School  
42 Vernon St.

Newton, MA 02458

Inspection: 6N000004  
Section: 1  
Phone: 559-7436  
Inspector: 1N11123 Nicola Assan  
Reason: 1-Routine  
Results: No Follow-up R2

Inspection Summary

Official Order for Correction: Based on an inspection today, the items checked indicate violations of 105 CMR 590.000/ 2013 Federal Food Code. This report, when signed below by the Commissioner of Health / Agent constitutes an order by the Commissioner of Health. Failure to correct violations cited in this report may result in suspension or revocation of the food establishment permit and cessation of food establishment operations. If aggrieved by this order, you have the right to a hearing. The request must be in writing and submitted to the Commissioner of Health at the above address within 10 days of receipt of this order.

Est. Type 1 - Food Svc Establish License/Permit # \_\_\_\_\_ Risk Category 02 Risk Level Observed 02 Low

Foodborne Illness Complaint Investigated (All) ☐ Involving More Than Two Persons ☐

FOODBORNE ILLNESS RISK FACTORS AND PUBLIC HEALTH INTERVENTIONS

Compliance status: IN = in compliance OUT = not in compliance N/O = not observed N/A = not applicable

Marked in appropriate box for COS and/or R. COS = corrected on-site during inspection R = repeat violation

Risk factors are improper practices or procedures identified as the most prevalent contributing factors of foodborne illness or injury. Public Health Interventions are control measures to prevent foodborne illnesses or injury.

Supervision

- 1. PIC Present, Knowledge and Duties
- 2. Certified Food Protection Manager

IN	OUT	N/O	N/A	COS	REPEAT
⊙	○			□	□
⊙	○	○		□	□

Employee Health / Responding to Contamination Events

- 3A. Employee Health: PIC Knowledge, Responsibilities & Reporting
- 3B. Employee Reporting to PIC
- 4. Proper Use of Restriction & Exclusion
- 5. Clean-up of Vomiting and Diarrheal Events

IN	OUT	N/O	N/A	COS	REPEAT
⊙	○			□	□
⊙	○			□	□
⊙	○			□	□
⊙	○			□	□

Good Hygienic Practices

- 6A. Proper eating, tasting, drinking, or tobacco use
- 6B. Preventing contamination when tasting

IN	OUT	N/O	N/A	COS	REPEAT
⊙	○	○		□	□
⊙	○	○		□	□

Inspector \_\_\_\_\_

Acknowledged Receipt : \_\_\_\_\_

## Food Establishment Inspection Report - FDA

### Good Hygienic Practices

7. No discharge from eyes, nose, and mouth

IN	OUT	N/O	N/A	COS	REPEAT
<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>

### Control of Hands as a Vehicle of Contamination

8A. Hands clean & properly washed

IN	OUT	N/O	N/A	COS	REPEAT
<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>

8B. Where to wash, hand antiseptics

IN	OUT	N/O	N/A	COS	REPEAT
<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>

9. No bare hand contact with RTE food or a pre-approved alternative procedure properly allowed

IN	OUT	N/O	N/A	COS	REPEAT
<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

10A. Adequate handwashing sinks properly supplied and accessible

IN	OUT	N/O	N/A	COS	REPEAT
<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>

10B. Handwashing sinks accesible with proper signage, handwashing aids

IN	OUT	N/O	N/A	COS	REPEAT
<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>

### Approved Sources

11A. Milk, eggs, juice, bottled water, hermetically sealed food, game animals

IN	OUT	N/O	N/A	COS	REPEAT
<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

11B. Packaged foods, labeling, whole muscle beef

IN	OUT	N/O	N/A	COS	REPEAT
<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

11C. Obtaining raw fish, packaged meat & poultry, eggs

IN	OUT	N/O	N/A	COS	REPEAT
<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

12A. Food received at proper temperature

IN	OUT	N/O	N/A	COS	REPEAT
<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

12B. Shipping and receiving frozen food

IN	OUT	N/O	N/A	COS	REPEAT
<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

13. Food in good condition, honestly presented, safe, & unadulterated

IN	OUT	N/O	N/A	COS	REPEAT
<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>

13B. Food package integrity

IN	OUT	N/O	N/A	COS	REPEAT
<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>

14A. Required records available: shellstock tags, parasite destruction

IN	OUT	N/O	N/A	COS	REPEAT
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

14B. Missing shellstock tags, destruction

IN	OUT	N/O	N/A	COS	REPEAT
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

14C. Parasite destruction- storing raw/partially cooked fish

IN	OUT	N/O	N/A	COS	REPEAT
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

### Protection from Contamination

15A. Food separated & protected

IN	OUT	N/O	N/A	COS	REPEAT
<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

15B. Cleaning equip/utensils/food containers

IN	OUT	N/O	N/A	COS	REPEAT
<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

16A. Food-contact surfaces: cleaned & sanitized immersion 171° F and above

IN	OUT	N/O	N/A	COS	REPEAT
<input checked="" type="radio"/>	<input type="radio"/>		<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

16B. Food contact surfaces cleaned and sanitized NMT 194° F, NLT 180° F

IN	OUT	N/O	N/A	COS	REPEAT
<input type="radio"/>	<input type="radio"/>		<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

16C. Mechanical warewashing equipment sanitization food contact surfaces, equip., utensils

IN	OUT	N/O	N/A	COS	REPEAT
<input type="radio"/>	<input type="radio"/>		<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

17. Proper disposition of returned, previously served reconditions, & unsafe food

IN	OUT	N/O	N/A	COS	REPEAT
<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>

### Time/Temperature Control for Safety Food (TCS Food)

18A. Proper cooking time & temperatures

IN	OUT	N/O	N/A	COS	REPEAT
<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

18B. Whole meat cooking and serving, storing

IN	OUT	N/O	N/A	COS	REPEAT
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

18C. Microwave cooking of raw animal foods

IN	OUT	N/O	N/A	COS	REPEAT
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

19. Proper reheating procedures for hot holding

IN	OUT	N/O	N/A	COS	REPEAT
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

20. Proper cooling time & temperatures

IN	OUT	N/O	N/A	COS	REPEAT
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

21. Proper hot holding temperatures

IN	OUT	N/O	N/A	COS	REPEAT
<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

Inspector

Acknowledged Receipt :

Page 2 of 6

## Food Establishment Inspection Report - FDA

### Time/Temperature Control for Safety Food (TCS Food)

	IN	OUT	N/O	N/A	COS	REPEAT
22. Proper cold holding temperatures	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
23. Proper Date Marking	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
23B. TCS Foods Disposition	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
24A. Time as a public health control: procedures	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
24B. Time as a public health control: temperatures & discarding food	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
24C. Time as a public health control: highly susceptible population (HSP)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

### Consumer Advisory

	IN	OUT	N/O	N/A	COS	REPEAT
25. Consumer advisory provided for raw or undercooked foods	<input type="radio"/>	<input type="radio"/>		<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

### Highly Susceptible Populations (HSP)

	IN	OUT	N/O	N/A	COS	REPEAT
26A. Pasteurized foods used; prohibited foods not offered	<input type="radio"/>	<input type="radio"/>		<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
26B. Reservice of foods	<input type="radio"/>	<input type="radio"/>		<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

### Chemical

	IN	OUT	N/O	N/A	COS	REPEAT
27. Food additives: approved and properly used	<input type="radio"/>	<input type="radio"/>		<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
28A. Toxic substances identified, stored and used	<input checked="" type="radio"/>	<input type="radio"/>		<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
28B. Poisonous materials, sanitizers, additives, medicines restriction, separation, storage	<input checked="" type="radio"/>	<input type="radio"/>		<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
28C. Conditions of Use: law	<input checked="" type="radio"/>	<input type="radio"/>		<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

### Conformance with Approved Procedures

	IN	OUT	N/O	N/A	COS	REPEAT
29A. Compliance with variance, specialized process, & HACCP plan	<input type="radio"/>	<input type="radio"/>		<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
29B. Treating juice- HACCP, reduced oxygen packaging w/out variance, conformance with approved procedures	<input type="radio"/>	<input type="radio"/>		<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
29C. When HACCP plan is required	<input type="radio"/>	<input type="radio"/>		<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

### GOOD RETAIL PRACTICES

Good Retail Practices are preventative measures to control the addition of pathogens, chemicals, and physical objects into foods.

IN = In compliance    OUT = not in compliance    COS - corrected on -site during inspection    REPEAT = repeat violation

### Safe Food and Water

	IN	OUT	N/O	N/A	COS	REPEAT
30. Pasteurized eggs used where required	<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>
31A. Water & ice from approved source	<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>
31B. Sampling, alternative water supply	<input type="radio"/>	<input type="radio"/>		<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
31C. Sampling report	<input type="radio"/>	<input type="radio"/>		<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
32. Variance obtained for specialized processing methods	<input type="radio"/>	<input type="radio"/>		<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

### Food Temperature Control

	IN	OUT	N/O	N/A	COS	REPEAT
33A. Proper cooling methods used; adequate equipment for temperature control	<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>

Inspector \_\_\_\_\_

Acknowledged Receipt : \_\_\_\_\_

Page 3 of 6

## Food Establishment Inspection Report - FDA

Food Temperature Control	IN	OUT	N/O	N/A	COS	REPEAT
33B. Frozen food	<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>
34. Plant food properly cooked for hot holding	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
35. Approved thawing methods used	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
36A. Thermometers provided and accurate	<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>
36B. Thermometers function properly	<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>
Food Identification	IN	OUT	COS	REPEAT		
37A. Food properly labeled; original container	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>		
37B. Food labels, labeling of ingredients	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>		
Prevention of Food Contamination	IN	OUT	COS	REPEAT		
38A. Insects, rodents, & animals not present	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>		
38B. Handling prohibition, controlling pests, prohibiting animals	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>		
39A. Contamination prevented during food storage	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>		
39B. Food display; ice used as an exterior coolant prohibited as an ingredient	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>		
39C. Consumer self-service operations- utensils and monitoring	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>		
40A. Personal cleanliness- prohibition jewelry	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>		
40B. Maintenance of fingernails	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>		
41. Wiping cloths; properly used and stored	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>		
42A. Washing Produce - following chemical manufacturers label	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>		
42B. Washing produce	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>		
42C. Washing produce- chemicals	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>		
Proper Use of Utensils	IN	OUT	COS	REPEAT		
43. In-use utensils; properly stored	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>		
44. Utensils, equipment & linens; properly stored, dried, and handled	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>		
45A. Single-use/ single service articles properly stored and used, required	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>		
45B. Single-use/service articles use limitation, kitchenware and tableware preventing contamination	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>		
46. Gloves used properly	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>		
Utensils, Equipment and Vending	IN	OUT	COS	REPEAT		
47A. Food & non-food contact surfaces cleanable	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>		
47B. Food contact surfaces /utensils cleanability, molluscan shellfish tanks, consumer self-service	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>		
47C. Properly designed characteristics: food and non-food contact surfaces, molluscan shellfish tanks	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>		
48A. Warewashing facilities: installed, maintained, & used; test strips	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>		
48B. Operational warewashing machines	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>		

Inspector \_\_\_\_\_

Acknowledged Receipt : \_\_\_\_\_

## Food Establishment Inspection Report - FDA

### Utensils, Equipment and Vending

49. Non-food contact surfaces clean

IN	OUT	COS	REPEAT
<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

### Physical Facilities

50. Hot & cold water available; adequate pressure

IN	OUT	N/A	COS	REPEAT
<input checked="" type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>

51A. Plumbing installed; proper backflow devices

IN	OUT	N/A	COS	REPEAT
<input checked="" type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>

51B. Prohibiting a cross-connection, inspection and servicing system

IN	OUT	N/A	COS	REPEAT
<input checked="" type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>

51C. Approved system and cleanable fixtures, service sink

IN	OUT	N/A	COS	REPEAT
<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

52A. Sewage and waste water properly disposed

IN	OUT	N/A	COS	REPEAT
<input checked="" type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>

52B. Grease traps easily accessible for cleaning

IN	OUT	N/A	COS	REPEAT
<input checked="" type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>

52C. Removing mobile food establishment waste

IN	OUT	N/A	COS	REPEAT
<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

53A. Toilet facilities; properly constructed, supplied, & cleaned

IN	OUT	N/A	COS	REPEAT
<input checked="" type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>

**This item has Notes. See Footnote 1 at end of questionnaire.**

Fail Notes | 5-501.17 Toilet room receptacle, covered- sanitary napkins  
[There was no cover on receptacle for the disposal of feminine hygiene products. Such receptacles must be covered.]

53B. Toilet tissue availability

IN	OUT	N/A	COS	REPEAT
<input checked="" type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>

54. Garbage & refuse properly disposed; facilities maintained

IN	OUT	N/A	COS	REPEAT
<input checked="" type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>

55A. Physical facilities installed, maintained, & clean

IN	OUT	N/A	COS	REPEAT
<input checked="" type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>

55B. Private homes and living or sleeping quarters, use prohibition

IN	OUT	N/A	COS	REPEAT
<input checked="" type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>

56. Adequate ventilation & lighting; designated areas used

IN	OUT	N/A	COS	REPEAT
<input checked="" type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>

### MASSACHUSETTS ONLY REGULATIONS

Rules and Regulations adopted for use in Massachusetts only.

#### Facilities

57A. Catering

IN	OUT	COS	REPEAT
<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

57B. When plans are reviewed, prerequisite for operations- valid permit

IN	OUT	COS	REPEAT
<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

57C. Contents of plans and specifications, preoperational inspections

IN	OUT	COS	REPEAT
<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

58. Mobile Food Operations

IN	OUT	COS	REPEAT
<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

59. Temporary Food Establishments

IN	OUT	COS	REPEAT
<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

60. Residential Kitchens

IN	OUT	COS	REPEAT
<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

#### Procedures

61. Anti-choking Procedures

IN	OUT	COS	REPEAT
<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

**This item has Notes. See Footnote 2 at end of questionnaire.**

62. Tobacco Products: Notice and Sale

IN	OUT	COS	REPEAT
<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

**This item has Notes. See Footnote 3 at end of questionnaire.**

63. Food Allergy Awareness Requirements

IN	OUT	COS	REPEAT
<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

Inspector

Acknowledged Receipt :

Page 5 of 6

## Food Establishment Inspection Report - FDA

### **Footnote 1**

**Notes:**

Informed by Kristin Smith, Operations Manager, that she has ordered new receptacles for the disposal of feminine hygiene products.

### **Footnote 2**

**Notes:**

Informed by Kristin Smith, Operations Manager, that anti-choking is the responsibility of the school nurse.

### **Footnote 3**

**Notes:**

Not applicable.

---

Inspector

---

Acknowledged Receipt :

Page 6 of 6



City of Newton  
Health and Human Services  
Deborah Youngblood, PhD, Commissioner  
1000 Commonwealth Ave Newton, MA 02459  
(617) 796-1420



Public Health  
Prevent. Promote. Protect.

Food Establishment Inspection Report - FDA

Insp Date: 9/28/2018 Business ID: 1N2067  
Business: Bigelow Middle School  
42 Vernon St.

Newton, MA 02458

Inspection: 6N000047  
Section: 1  
Phone: 559-7436  
Inspector: 1N11123 Nicola Assan  
Reason: 1-Routine  
Results: No Follow-up R2

Inspection Summary

Official Order for Correction: Based on an inspection today, the items checked indicate violations of 105 CMR 590.000/ 2013 Federal Food Code. This report, when signed below by the Commissioner of Health / Agent constitutes an order by the Commissioner of Health. Failure to correct violations cited in this report may result in suspension or revocation of the food establishment permit and cessation of food establishment operations. If aggrieved by this order, you have the right to a hearing. The request must be in writing and submitted to the Commissioner of Health at the above address within 10 days of receipt of this order.

Est. Type 1 - Food Svc Establis License/Permit # \_\_\_\_\_ Risk Category 02 Risk Level Observed 02 Low

Foodborne Illness Complaint Investigated (All) ☐ Involving More Than Two Persons ☐

FOODBORNE ILLNESS RISK FACTORS AND PUBLIC HEALTH INTERVENTIONS

Compliance status: IN = in compliance OUT = not in compliance N/O = not observed N/A = not applicable

Marked in appropriate box for COS and/or R. COS = corrected on-site during inspection R = repeat violation

Risk factors are improper practices or procedures identified as the most prevalent contributing factors of foodborne illness or injury. Public Health Interventions are control measures to prevent foodborne illnesses or injury.

Supervision

1. PIC Present, Knowledge and Duties
2. Certified Food Protection Manager

IN	OUT	N/O	N/A	COS	REPEAT
<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>
<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>

Employee Health / Responding to Contamination Events

- 3A. Employee Health: PIC Knowledge, Responsibilities & Reporting
- 3B. Employee Reporting to PIC
4. Proper Use of Restriction & Exclusion
5. Clean-up of Vomiting and Diarrheal Events

IN	OUT	N/O	N/A	COS	REPEAT
<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>
<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>
<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>
<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>

Good Hygienic Practices

- 6A. Proper eating, tasting, drinking, or tobacco use
- 6B. Preventing contamination when tasting

IN	OUT	N/O	N/A	COS	REPEAT
<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>
<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>

*Assan*

Inspector

Acknowledged Receipt : Tim Viveiros

Page 1 of 7

## Food Establishment Inspection Report - FDA

### Good Hygienic Practices

7. No discharge from eyes, nose, and mouth

IN	OUT	N/O	N/A	COS	REPEAT
<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>

### Control of Hands as a Vehicle of Contamination

8A. Hands clean & properly washed

IN	OUT	N/O	N/A	COS	REPEAT
<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>

8B. Where to wash, hand antiseptics

IN	OUT	N/O	N/A	COS	REPEAT
<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>

9. No bare hand contact with RTE food or a pre-approved alternative procedure properly allowed

IN	OUT	N/O	N/A	COS	REPEAT
<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

10A. Adequate handwashing sinks properly supplied and accessible

IN	OUT	N/O	N/A	COS	REPEAT
<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>

10B. Handwashing sinks accesible with proper signage, handwashing aids

IN	OUT	N/O	N/A	COS	REPEAT
<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>

### Approved Sources

11A. Milk, eggs, juice, bottled water, hermetically sealed food, game animals

IN	OUT	N/O	N/A	COS	REPEAT
<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

11B. Packaged foods, labeling, whole muscle beef

IN	OUT	N/O	N/A	COS	REPEAT
<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

11C. Obtaining raw fish, packaged meat & poultry, eggs

IN	OUT	N/O	N/A	COS	REPEAT
<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

12A. Food received at proper temperature

IN	OUT	N/O	N/A	COS	REPEAT
<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

12B. Shipping and receiving frozen food

IN	OUT	N/O	N/A	COS	REPEAT
<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

13. Food in good condition, honestly presented, safe, & unadulterated

IN	OUT	N/O	N/A	COS	REPEAT
<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>

13B. Food package integrity

IN	OUT	N/O	N/A	COS	REPEAT
<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>

14A. Required records available: shellstock tags, parasite destruction

IN	OUT	N/O	N/A	COS	REPEAT
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

14B. Missing shellstock tags, destruction

IN	OUT	N/O	N/A	COS	REPEAT
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

14C. Parasite destruction- storing raw/partially cooked fish

IN	OUT	N/O	N/A	COS	REPEAT
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

### Protection from Contamination

15A. Food separated & protected

IN	OUT	N/O	N/A	COS	REPEAT
<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

15B. Cleaning equip/utensils/food containers

IN	OUT	N/O	N/A	COS	REPEAT
<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

16A. Food-contact surfaces: cleaned & sanitized immersion 171° F and above

IN	OUT	N/O	N/A	COS	REPEAT
<input checked="" type="radio"/>	<input type="radio"/>		<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

***This item has Notes. See Footnote 1 at end of questionnaire.***

16B. Food contact surfaces cleaned and sanitized NMT 194° F, NLT 180° F

IN	OUT	N/O	N/A	COS	REPEAT
<input type="radio"/>	<input type="radio"/>		<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

16C. Mechanical warewashing equipment sanitization food contact surfaces, equip., utensils

IN	OUT	N/O	N/A	COS	REPEAT
<input type="radio"/>	<input type="radio"/>		<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

17. Proper disposition of returned, previously served reconditions, & unsafe food

IN	OUT	N/O	N/A	COS	REPEAT
<input type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>

### Time/Temperature Control for Safety Food (TCS Food)

18A. Proper cooking time & temperatures

IN	OUT	N/O	N/A	COS	REPEAT
<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

***This item has Notes. See Footnote 2 at end of questionnaire.***

18B. Whole meat cooking and serving, storing

IN	OUT	N/O	N/A	COS	REPEAT
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

18C. Microwave cooking of raw animal foods

IN	OUT	N/O	N/A	COS	REPEAT
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

19. Proper reheating procedures for hot holding

IN	OUT	N/O	N/A	COS	REPEAT
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

20. Proper cooling time & temperatures

IN	OUT	N/O	N/A	COS	REPEAT
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

*ASSON*

Inspector

Acknowledged Receipt : Tim Viveiros

Page 2 of 7

## Food Establishment Inspection Report - FDA

### Time/Temperature Control for Safety Food (TCS Food)

21. Proper hot holding temperatures

IN OUT N/O N/A COS REPEAT  
☐ ☒ ☐ ☐ ☐ ☐

Fail Notes 3-501.16 (A)

*\*Hot TCS foods Maintained at or Above 135°F, Also for whole meat roasts (130°F and above)  
 [The temperature of the hot dogs and beefburgers in the hot holding unit was recorded at 119.2 - 121.8 degrees F. Maintaining food at a temperature of 135 degrees F or greater is sufficient to prevent the growth of pathogens and is therefore an effective measure in the prevention of foodborne illness.]*

22. Proper cold holding temperatures

☒ ☐ ☐ ☐ ☐ ☐

23. Proper Date Marking

☒ ☐ ☐ ☐ ☐ ☐

23B. TCS Foods Disposition

☒ ☐ ☐ ☐ ☐ ☐

24A. Time as a public health control: procedures

☐ ☐ ☐ ☒ ☐ ☐

24B. Time as a public health control: temperatures & discarding food

☐ ☐ ☐ ☒ ☐ ☐

24C. Time as a public health control: highly susceptible population (HSP)

☐ ☐ ☐ ☒ ☐ ☐

### Consumer Advisory

25. Consumer advisory provided for raw or undercooked foods

IN OUT N/O N/A COS REPEAT  
☐ ☐ ☐ ☒ ☐ ☐

### Highly Susceptible Populations (HSP)

26A. Pasteurized foods used; prohibited foods not offered

IN OUT N/O N/A COS REPEAT  
☐ ☐ ☐ ☒ ☐ ☐

26B. Reservice of foods

☐ ☐ ☐ ☒ ☐ ☐

### Chemical

27. Food additives: approved and properly used

IN OUT N/O N/A COS REPEAT  
☐ ☐ ☐ ☒ ☐ ☐

28A. Toxic substances identified, stored and used

☒ ☐ ☐ ☐ ☐ ☐

28B. Poisonous materials, sanitizers, additives, medicines restriction, separation, storage

☒ ☐ ☐ ☐ ☐ ☐

28C. Conditions of Use: law

☒ ☐ ☐ ☐ ☐ ☐

### Conformance with Approved Procedures

29A. Compliance with variance, specialized process, & HACCP plan

IN OUT N/O N/A COS REPEAT  
☐ ☐ ☐ ☒ ☐ ☐

29B. Treating juice- HACCP, reduced oxygen packaging w/out variance, conformance with approved procedures

☐ ☐ ☐ ☒ ☐ ☐

29C. When HACCP plan is required

☐ ☐ ☐ ☒ ☐ ☐

### GOOD RETAIL PRACTICES

Good Retail Practices are preventative measures to control the addition of pathogens, chemicals, and physical objects into foods.

IN = In compliance OUT = not in compliance COS - corrected on -site during inspection REPEAT = repeat violation

### Safe Food and Water

30. Pasteurized eggs used where required

IN OUT N/O N/A COS REPEAT  
☐ ☐ ☐ ☐ ☐ ☐

31A. Water & ice from approved source

☒ ☐ ☐ ☐ ☐ ☐

*Assan*

Inspector

Acknowledged Receipt : Tim Viveiros

Page 3 of 7

## Food Establishment Inspection Report - FDA

Safe Food and Water	IN	OUT	N/O	N/A	COS	REPEAT
31B. Sampling, alternative water supply	<input type="radio"/>	<input type="radio"/>		<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
31C. Sampling report	<input type="radio"/>	<input type="radio"/>		<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
32. Variance obtained for specialized processing methods	<input type="radio"/>	<input type="radio"/>		<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
Food Temperature Control	IN	OUT	N/O	N/A	COS	REPEAT
33A. Proper cooling methods used; adequate equipment for temperature control	<input type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>
33B. Frozen food	<input type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>
34. Plant food properly cooked for hot holding	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
35. Approved thawing methods used	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
36A. Thermometers provided and accurate	<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>
36B. Thermometers function properly	<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>
Food Identification	IN	OUT	COS	REPEAT		
37A. Food properly labeled; original container		<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>	
37B. Food labels, labeling of ingredients		<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Prevention of Food Contamination	IN	OUT	COS	REPEAT		
38A. Insects, rodents, & animals not present		<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>	
38B. Handling prohibition, controlling pests, prohibiting animals		<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>	
39A. Contamination prevented during food storage		<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>	
39B. Food display; ice used as an exterior coolant prohibited as an ingredient		<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>	
39C. Consumer self-service operations- utensils and monitoring		<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>	
40A. Personal cleanliness- prohibition jewelry		<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>	
40B. Maintenance of fingernails		<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>	
41. Wiping cloths; properly used and stored		<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>	
42A. Washing Produce - following chemical manufacturers label		<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>	
42B. Washing produce		<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>	
42C. Washing produce- chemicals		<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Proper Use of Utensils	IN	OUT	COS	REPEAT		
43. In-use utensils; properly stored		<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>	
44. Utensils, equipment & linens; properly stored, dried, and handled		<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>	
45A. Single-use/ single service articles properly stored and used, required		<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>	
45B. Single-use/service articles use limitation, kitchenware and tableware preventing contamination		<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>	
46. Gloves used properly		<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Utensils, Equipment and Vending	IN	OUT	COS	REPEAT		
47A. Food & non-food contact surfaces cleanable		<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>	

*ASSON*

Inspector

Acknowledged Receipt : Tim Viveiros

Page 4 of 7

## Food Establishment Inspection Report - FDA

### Utensils, Equipment and Vending

	IN	OUT	COS	REPEAT
47B. Food contact surfaces /utensils cleanability, molluscan shellfish tanks, consumer self-service	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
47C. Properly designed characteristics: food and non-food contact surfaces, molluscan shellfish tanks	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
48A. Warewashing facilities: installed, maintained, & used; test strips	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
<b>This item has Notes. See Footnote 3 at end of questionnaire.</b>				
48B. Operational warewashing machines	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
49. Non-food contact surfaces clean	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

### Physical Facilities

	IN	OUT	N/A	COS	REPEAT
50. Hot & cold water available; adequate pressure	<input checked="" type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>
51A. Plumbing installed; proper backflow devices	<input checked="" type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>
51B. Prohibiting a cross-connection, inspection and servicing system	<input type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>
51C. Approved system and cleanable fixtures, service sink	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
52A. Sewage and waste water properly disposed	<input checked="" type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>
52B. Grease traps easily accessible for cleaning	<input checked="" type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>
52C. Removing mobile food establishment waste	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
53A. Toilet facilities; properly constructed, supplied, & cleaned	<input type="radio"/>	<input checked="" type="radio"/>		<input checked="" type="checkbox"/>	<input type="checkbox"/>
<div style="display: inline-block; width: 150px;">Fail Notes</div> <div> 5-501.17 Toilet room receptacle, covered- sanitary napkins  [The receptacle provided for the disposal of sanitary napkins was not covered. The toilet room used by females shall be provided with a covered receptacle for the disposal of sanitary napkins.] </div>					
53B. Toilet tissue availability	<input checked="" type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>
54. Garbage & refuse properly disposed; facilities maintained	<input checked="" type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>
55A. Physical facilities installed, maintained, & clean	<input checked="" type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>
55B. Private homes and living or sleeping quarters, use prohibition	<input checked="" type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>
56. Adequate ventilation & lighting; designated areas used	<input checked="" type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>

### MASSACHUSETTS ONLY REGULATIONS

Rules and Regulations adopted for use in Massachusetts only.

### Facilities

	IN	OUT	COS	REPEAT
57A. Catering	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
57B. When plans are reviewed, prerequisite for operations- valid permit	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
57C. Contents of plans and specifications, preoperational inspections	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
58. Mobile Food Operations	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
59. Temporary Food Establishments	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
60. Residential Kitchens	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

Inspector

Acknowledged Receipt : Tim Viveiros

Page 5 of 7

## Food Establishment Inspection Report - FDA

### Procedures

61. Anti-choking Procedures

62. Tobacco Products: Notice and Sale

63. Food Allergy Awareness Requirements

IN OUT COS REPEAT

☐ ☐ ☐ ☐

☐ ☐ ☐ ☐

☐ ☐ ☐ ☐



Inspector

Acknowledged Receipt : Tim Viveiros

Page 6 of 7

## Food Establishment Inspection Report - FDA

### Footnote 1

**Notes:**

You need to ensure that the concentration of sanitizing solutions is regularly checked using the appropriate testing devices. This will ensure that the correct concentration is maintained and food contact surfaces etc are effectively sanitized.

### Footnote 2

**Notes:**

Cooking not observed at time of visit although temp logs indicate that cooking temps exceed that which is required in the Food Code.

### Footnote 3

**Notes:**

You need to ensure that the concentration of the sanitizing solutions (3 bay sink compartment and red buckets) is regularly checked using the appropriate testing devices. Testing devices to measure the concentration of sanitizing solutions are required for 2 reasons:

- 1) The use of chemical requires minimum concentrations of the sanitizer during the final rinse step to ensure sanitization; and
- 2) Too much sanitizer in the final rinse water could be toxic.



Inspector

Acknowledged Receipt : Tim Viveiros

Page 7 of 7



City of Newton  
Health and Human Services  
Deborah Youngblood, PhD, Commissioner  
1000 Commonwealth Ave Newton, MA 02459  
(617) 796-1420



Public Health  
Prevent. Promote. Protect.

Food Establishment Inspection Report - FDA

Insp Date: 4/4/2019 Business ID: 1N2067

Business: Bigelow Middle School  
42 Vernon St.

Newton, MA 02458

Inspection: 6N000101

Section: 1

Phone: 559-7436

Inspector: 1N11123 Nicola Assan

Reason: 1-Routine

Results: No Follow-up R2

Inspection Summary

Official Order for Correction: Based on an inspection today, the items checked indicate violations of 105 CMR 590.000/ 2013 Federal Food Code. This report, when signed below by the Commissioner of Health / Agent constitutes an order by the Commissioner of Health. Failure to correct violations cited in this report may result in suspension or revocation of the food establishment permit and cessation of food establishment operations. If aggrieved by this order, you have the right to a hearing. The request must be in writing and submitted to the Commissioner of Health at the above address within 10 days of receipt of this order.

Est. Type 1 - Food Svc Establis License/Permit # \_\_\_\_\_ Risk Category 02 Risk Level Observed 02 Low

Foodborne Illness Complaint Investigated (All) ☐ Involving More Than Two Persons ☐

FOODBORNE ILLNESS RISK FACTORS AND PUBLIC HEALTH INTERVENTIONS

Compliance status: IN = in compliance OUT = not in compliance N/O = not observed N/A = not applicable

Marked in appropriate box for COS and/or R. COS = corrected on-site during inspection R = repeat violation

Risk factors are improper practices or procedures identified as the most prevalent contributing factors of foodborne illness or injury. Public Health Interventions are control measures to prevent foodborne illnesses or injury.

Supervision

1. PIC Present, Knowledge and Duties

IN	OUT	N/O	N/A	COS	REPEAT
<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>

2. Certified Food Protection Manager

<input checked="" type="radio"/>	<input type="radio"/>		<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
----------------------------------	-----------------------	--	-----------------------	--------------------------	--------------------------

Employee Health / Responding to Contamination Events

3A. Employee Health: PIC Knowledge, Responsibilities & Reporting

<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>
----------------------------------	-----------------------	--	--	--------------------------	--------------------------

3B. Employee Reporting to PIC

<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>
----------------------------------	-----------------------	--	--	--------------------------	--------------------------

4. Proper Use of Restriction & Exclusion

<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>
----------------------------------	-----------------------	--	--	--------------------------	--------------------------

5. Clean-up of Vomiting and Diarrheal Events

<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>
----------------------------------	-----------------------	--	--	--------------------------	--------------------------

Good Hygienic Practices

6A. Proper eating, tasting, drinking, or tobacco use

IN	OUT	N/O	N/A	COS	REPEAT
<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>

6B. Preventing contamination when tasting

<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>
----------------------------------	-----------------------	-----------------------	--	--------------------------	--------------------------

Assan

Inspector

Acknowledged Receipt : Tim Viveiros / Christen Smith

Page 1 of 5

## Food Establishment Inspection Report - FDA

Good Hygienic Practices	IN	OUT	N/O	N/A	COS	REPEAT
-------------------------	----	-----	-----	-----	-----	--------

7. No discharge from eyes, nose, and mouth

⊙	○	○		□	□
---	---	---	--	---	---

Control of Hands as a Vehicle of Contamination	IN	OUT	N/O	N/A	COS	REPEAT
--	----	-----	-----	-----	-----	--------

8A. Hands clean & properly washed

⊙	○	○		□	□
---	---	---	--	---	---

8B. Where to wash, hand antiseptics

⊙	○	○		□	□
---	---	---	--	---	---

9. No bare hand contact with RTE food or a pre-approved alternative procedure properly allowed

⊙	○	○	○	□	□
---	---	---	---	---	---

10A. Adequate handwashing sinks properly supplied and accessible

⊙	○			□	□
---	---	--	--	---	---

10B. Handwashing sinks accesible with proper signage, handwashing aids

⊙	○			□	□
---	---	--	--	---	---

Approved Sources	IN	OUT	N/O	N/A	COS	REPEAT
------------------	----	-----	-----	-----	-----	--------

11A. Milk, eggs, juice, bottled water, hermetically sealed food, game animals

⊙	○	○	○	□	□
---	---	---	---	---	---

11B. Packaged foods, labeling, whole muscle beef

⊙	○	○	○	□	□
---	---	---	---	---	---

11C. Obtaining raw fish, packaged meat & poultry, eggs

⊙	○	○	○	□	□
---	---	---	---	---	---

12A. Food received at proper temperature

○	○	⊙	○	□	□
---	---	---	---	---	---

12B. Shipping and receiving frozen food

○	○	⊙	○	□	□
---	---	---	---	---	---

13. Food in good condition, honestly presented, safe, & unadulterated

⊙	○			□	□
---	---	--	--	---	---

13B. Food package integrity

⊙	○			□	□
---	---	--	--	---	---

14A. Required records available: shellstock tags, parasite destruction

○	○	○	⊙	□	□
---	---	---	---	---	---

14B. Missing shellstock tags, destruction

○	○	○	⊙	□	□
---	---	---	---	---	---

14C. Parasite destruction- storing raw/partially cooked fish

○	○	○	⊙	□	□
---	---	---	---	---	---

Protection from Contamination	IN	OUT	N/O	N/A	COS	REPEAT
-------------------------------	----	-----	-----	-----	-----	--------

15A. Food separated & protected

⊙	○	○	○	□	□
---	---	---	---	---	---

15B. Cleaning equip/utensils/food containers

⊙	○	○	○	□	□
---	---	---	---	---	---

16A. Food-contact surfaces: cleaned & sanitized immersion 171° F and above

⊙	○		○	□	□
---	---	--	---	---	---

16B. Food contact surfaces cleaned and sanitized NMT 194° F, NLT 180° F

⊙	○		○	□	□
---	---	--	---	---	---

16C. Mechanical warewashing equipment sanitization food contact surfaces, equip., utensils

⊙	○		○	□	□
---	---	--	---	---	---

17. Proper disposition of returned, previously served reconditions, & unsafe food

⊙	○			□	□
---	---	--	--	---	---

Time/Temperature Control for Safety Food (TCS Food)	IN	OUT	N/O	N/A	COS	REPEAT
---	----	-----	-----	-----	-----	--------

18A. Proper cooking time & temperatures

○	○	⊙	○	□	□
---	---	---	---	---	---

18B. Whole meat cooking and serving, storing

○	○	⊙	○	□	□
---	---	---	---	---	---

18C. Microwave cooking of raw animal foods

○	○	○	⊙	□	□
---	---	---	---	---	---

19. Proper reheating procedures for hot holding

○	○	○	⊙	□	□
---	---	---	---	---	---

20. Proper cooling time & temperatures

○	○	○	⊙	□	□
---	---	---	---	---	---

21. Proper hot holding temperatures

○	⊙	○	○	□	□
---	---	---	---	---	---

*Assan*

Inspector

Acknowledged Receipt : Tim Viveiros / Christen Smith

Page 2 of 5

## Food Establishment Inspection Report - FDA

Time/Temperature Control for Safety Food (TCS Food)

IN OUT N/O N/A COS REPEAT

**Fail Notes** 3-501.16 (A) *\*Hot TCS foods Maintained at or Above 135oF, Also for whole meat roasts (130F and above)  
[The hot holding unit for the burgers and hot dogs had temperatures between 129 and 131 degrees F. Except during preparation, cooking or cooling, or when time is used as the public health control, TCS (time/temperature control for safety) foods shall be maintained at 135 degrees F or above.]*

- |   |                                  |                       |                       |                                  |                          |                          |
|---|----------------------------------|-----------------------|-----------------------|----------------------------------|--------------------------|--------------------------|
| 22. Proper cold holding temperatures                                      | <input checked="" type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/>            | <input type="checkbox"/> | <input type="checkbox"/> |
| 23. Proper Date Marking   | <input checked="" type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/>            | <input type="checkbox"/> | <input type="checkbox"/> |
| 23B. TCS Foods Disposition  | <input checked="" type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/>            | <input type="checkbox"/> | <input type="checkbox"/> |
| 24A. Time as a public health control: procedures                          | <input type="radio"/>            | <input type="radio"/> | <input type="radio"/> | <input checked="" type="radio"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 24B. Time as a public health control: temperatures & discarding food      | <input type="radio"/>            | <input type="radio"/> | <input type="radio"/> | <input checked="" type="radio"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 24C. Time as a public health control: highly susceptible population (HSP) | <input type="radio"/>            | <input type="radio"/> | <input type="radio"/> | <input checked="" type="radio"/> | <input type="checkbox"/> | <input type="checkbox"/> |

Consumer Advisory

IN OUT N/O N/A COS REPEAT

- |   |                       |                       |                       |                                  |                          |                          |
|---|-----------------------|-----------------------|-----------------------|----------------------------------|--------------------------|--------------------------|
| 25. Consumer advisory provided for raw or undercooked foods | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input checked="" type="radio"/> | <input type="checkbox"/> | <input type="checkbox"/> |
|---|-----------------------|-----------------------|-----------------------|----------------------------------|--------------------------|--------------------------|

Highly Susceptible Populations (HSP)

IN OUT N/O N/A COS REPEAT

- |   |                       |                       |                       |                                  |                          |                          |
|---|-----------------------|-----------------------|-----------------------|----------------------------------|--------------------------|--------------------------|
| 26A. Pasteurized foods used; prohibited foods not offered | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input checked="" type="radio"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 26B. Reservice of foods                                   | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input checked="" type="radio"/> | <input type="checkbox"/> | <input type="checkbox"/> |

Chemical

IN OUT N/O N/A COS REPEAT

- |   |                                  |                       |                       |                                  |                          |                          |
|---|----------------------------------|-----------------------|-----------------------|----------------------------------|--------------------------|--------------------------|
| 27. Food additives: approved and properly used  | <input type="radio"/>            | <input type="radio"/> | <input type="radio"/> | <input checked="" type="radio"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 28A. Toxic substances identified, stored and used   | <input checked="" type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/>            | <input type="checkbox"/> | <input type="checkbox"/> |
| 28B. Poisonous materials, sanitizers, additives, medicines restriction, separation, storage | <input checked="" type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/>            | <input type="checkbox"/> | <input type="checkbox"/> |
| 28C. Conditions of Use: law   | <input checked="" type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/>            | <input type="checkbox"/> | <input type="checkbox"/> |

Conformance with Approved Procedures

IN OUT N/O N/A COS REPEAT

- |   |                       |                       |                       |                                  |                          |                          |
|---|-----------------------|-----------------------|-----------------------|----------------------------------|--------------------------|--------------------------|
| 29A. Compliance with variance, specialized process, & HACCP plan  | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input checked="" type="radio"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 29B. Treating juice- HACCP, reduced oxygen packaging w/out variance, conformance with approved procedures | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input checked="" type="radio"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 29C. When HACCP plan is required  | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input checked="" type="radio"/> | <input type="checkbox"/> | <input type="checkbox"/> |

### GOOD RETAIL PRACTICES

Good Retail Practices are preventative measures to control the addition of pathogens, chemicals, and physical objects into foods.

IN = In compliance OUT = not in compliance COS - corrected on -site during inspection REPEAT = repeat violation

Safe Food and Water

IN OUT N/O N/A COS REPEAT

- |  |                                  |                       |                       |                       |                          |                          |
|--|----------------------------------|-----------------------|-----------------------|-----------------------|--------------------------|--------------------------|
| 30. Pasteurized eggs used where required | <input type="radio"/>            | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 31A. Water & ice from approved source    | <input checked="" type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="checkbox"/> | <input type="checkbox"/> |

*Assan*

Inspector

Acknowledged Receipt : Tim Viveiros / Christen Smith

Page 3 of 5

## Food Establishment Inspection Report - FDA

Safe Food and Water	IN	OUT	N/O	N/A	COS	REPEAT
31B. Sampling, alternative water supply	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>	
31C. Sampling report	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>	
32. Variance obtained for specialized processing methods	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Food Temperature Control	IN	OUT	N/O	N/A	COS	REPEAT
33A. Proper cooling methods used; adequate equipment for temperature control	<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>
33B. Frozen food	<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>
34. Plant food properly cooked for hot holding	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
35. Approved thawing methods used	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
36A. Thermometers provided and accurate	<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>
36B. Thermometers function properly	<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>
Food Identification	IN	OUT			COS	REPEAT
37A. Food properly labeled; original container		<input checked="" type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>
37B. Food labels, labeling of ingredients		<input checked="" type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>
Prevention of Food Contamination	IN	OUT			COS	REPEAT
38A. Insects, rodents, & animals not present		<input checked="" type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>
38B. Handling prohibition, controlling pests, prohibiting animals		<input checked="" type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>
39A. Contamination prevented during food storage		<input checked="" type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>
39B. Food display; ice used as an exterior coolant prohibited as an ingredient		<input checked="" type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>
39C. Consumer self-service operations- utensils and monitoring		<input checked="" type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>
40A. Personal cleanliness- prohibition jewelry		<input checked="" type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>
40B. Maintenance of fingernails		<input checked="" type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>
41. Wiping cloths; properly used and stored		<input checked="" type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>
42A. Washing Produce - following chemical manufacturers label		<input type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>
42B. Washing produce		<input checked="" type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>
42C. Washing produce- chemicals		<input type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>
Proper Use of Utensils	IN	OUT			COS	REPEAT
43. In-use utensils; properly stored		<input checked="" type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>
44. Utensils, equipment & linens; properly stored, dried, and handled		<input checked="" type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>
45A. Single-use/ single service articles properly stored and used, required		<input checked="" type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>
45B. Single-use/service articles use limitation, kitchenware and tableware preventing contamination		<input checked="" type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>
46. Gloves used properly		<input checked="" type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>
Utensils, Equipment and Vending	IN	OUT			COS	REPEAT
47A. Food & non-food contact surfaces cleanable		<input checked="" type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>

*Assan*

Inspector

Acknowledged Receipt : Tim Viveiros / Christen Smith

Page 4 of 5

## Food Establishment Inspection Report - FDA

### Utensils, Equipment and Vending

	IN	OUT	COS	REPEAT
47B. Food contact surfaces /utensils cleanability, molluscan shellfish tanks, consumer self-service	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
47C. Properly designed characteristics: food and non-food contact surfaces, molluscan shellfish tanks	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
48A. Warewashing facilities: installed, maintained, & used; test strips	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
48B. Operational warewashing machines	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
49. Non-food contact surfaces clean	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

### Physical Facilities

	IN	OUT	N/A	COS	REPEAT
50. Hot & cold water available; adequate pressure	<input checked="" type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>
51A. Plumbing installed; proper backflow devices	<input checked="" type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>
51B. Prohibiting a cross-connection, inspection and servicing system	<input checked="" type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>
51C. Approved system and cleanable fixtures, service sink	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
52A. Sewage and waste water properly disposed	<input checked="" type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>
52B. Grease traps easily accessible for cleaning	<input checked="" type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>
52C. Removing mobile food establishment waste	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
53A. Toilet facilities; properly constructed, supplied, & cleaned	<input checked="" type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>
53B. Toilet tissue availability	<input checked="" type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>
54. Garbage & refuse properly disposed; facilities maintained	<input checked="" type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>
55A. Physical facilities installed, maintained, & clean	<input checked="" type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>
55B. Private homes and living or sleeping quarters, use prohibition	<input checked="" type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>
56. Adequate ventilation & lighting; designated areas used	<input checked="" type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>

### MASSACHUSETTS ONLY REGULATIONS

Rules and Regulations adopted for use in Massachusetts only.

#### Facilities

	IN	OUT	COS	REPEAT
57A. Catering	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
57B. When plans are reviewed, prerequisite for operations- valid permit	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
57C. Contents of plans and specifications, preoperational inspections	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
58. Mobile Food Operations	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
59. Temporary Food Establishments	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
60. Residential Kitchens	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

#### Procedures

	IN	OUT	COS	REPEAT
61. Anti-choking Procedures	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
62. Tobacco Products: Notice and Sale	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
63. Food Allergy Awareness Requirements	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

*Assan*

Inspector

Acknowledged Receipt : Tim Viveiros / Christen Smith

Page 5 of 5



City of Newton  
Health and Human Services  
Deborah Youngblood, PhD, Commissioner  
1000 Commonwealth Ave Newton, MA 02459  
(617) 796-1420



Public Health  
Prevent. Promote. Protect.

Food Establishment Inspection Report - FDA

Insp Date: 11/6/2017  
Business: Bowen School  
280 Cypress St.

Business ID: 1N2077

Newton, MA 02459

Inspection: 6N000002

Section: 2

Phone: 559-9330

Inspector: 1N11123 Nicola Assan

Reason: 1-Routine

Results: No Follow-up R2

Inspection Summary

Official Order for Correction: Based on an inspection today, the items checked indicate violations of 105 CMR 590.000/ 2013 Federal Food Code. This report, when signed below by the Commissioner of Health / Agent constitutes an order by the Commissioner of Health. Failure to correct violations cited in this report may result in suspension or revocation of the food establishment permit and cessation of food establishment operations. If aggrieved by this order, you have the right to a hearing. The request must be in writing and submitted to the Commissioner of Health at the above address within 10 days of receipt of this order.

Est. Type 1 - Food Svc License/Permit # Risk Category 02 Risk Level Observed 02 Low  
Establishme

Foodborne Illness Complaint Investigated (All) ☐ Involving More Than Two Persons ☐

FOODBORNE ILLNESS RISK FACTORS AND PUBLIC HEALTH INTERVENTIONS

Compliance status: IN = in compliance OUT = not in compliance N/O = not observed N/A = not applicable

Marked in appropriate box for COS and/or R. COS = corrected on-site during inspection R = repeat violation

Risk factors are improper practices or procedures identified as the most prevalent contributing factors of foodborne illness or injury. Public Health Interventions are control measures to prevent foodborne illnesses or injury.

Supervision	IN	OUT	N/O	N/A	COS	REPEAT
1. PIC Present, Knowledge and Duties	<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>
2. Certified Food Protection Manager	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>

**This item has Notes. See Footnote 1 at end of questionnaire.**

Fail Notes 2-102.12 (A) Certified food protection manager  
[The PIC did not have a serve safe certificate. The PIC needs to demonstrate needs to demonstrate required knowledge of food safety through certification and passing an examination that is part of an accredited program.]

Employee Health / Responding to Contamination Events	IN	OUT	N/O	N/A	COS	REPEAT
3A. Employee Health: PIC Knowledge, Responsibilities & Reporting	<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>
3B. Employee Reporting to PIC	<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>

Inspector

Acknowledged Receipt:

Page 1 of 7

## Food Establishment Inspection Report - FDA

Employee Health / Responding to Contamination Events			IN	OUT	N/O	N/A	COS	REPEAT
4. Proper Use of Restriction & Exclusion			<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>
5. Clean-up of Vomiting and Diarrheal Events			<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>
Good Hygienic Practices			IN	OUT	N/O	N/A	COS	REPEAT
6A. Proper eating, tasting, drinking, or tobacco use			<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>
6B. Preventing contamination when tasting			<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>
7. No discharge from eyes, nose, and mouth			<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>
Control of Hands as a Vehicle of Contamination			IN	OUT	N/O	N/A	COS	REPEAT
8A. Hands clean & properly washed			<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>
8B. Where to wash, hand antiseptics			<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>
9. No bare hand contact with RTE food or a pre-approved alternative procedure properly allowed			<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
10A. Adequate handwashing sinks properly supplied and accessible			<input type="radio"/>	<input checked="" type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>
<b><i>This item has Notes. See Footnote 2 at end of questionnaire.</i></b>								
Fail Notes	6-301.11	Handwashing Cleanser, Availability [There was no soap at the handwashing sink. Handwashing sinks need to be supplied with suitable hand cleansers.]						
	6-301.12	Hand Drying Provision [There was no paper towels/hand dryer at the handwashing sink. Handwashing sinks need to be supplied with hand dryers or disposable towels and waste containers.]						
			<input type="radio"/>	<input checked="" type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>
Fail Notes	6-301.14	Handwashing signage [There was no handwashing signage at handwashing sink. A sign or poster is required to remind food handlers to wash their hands.]					<input type="checkbox"/>	<input type="checkbox"/>
10B. Handwashing sinks accessible with proper signage, handwashing aids			<input type="radio"/>	<input checked="" type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>
Approved Sources			IN	OUT	N/O	N/A	COS	REPEAT
11A. Milk, eggs, juice, bottled water, hermetically sealed food, game animals			<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
11B. Packaged foods, labeling, whole muscle beef			<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
11C. Obtaining raw fish, packaged meat & poultry, eggs			<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
12A. Food received at proper temperature			<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
12B. Shipping and receiving frozen food			<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
13. Food in good condition, honestly presented, safe, & unadulterated			<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>
13B. Food package integrity			<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>
14A. Required records available: shellstock tags, parasite destruction			<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
14B. Missing shellstock tags, destruction			<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
14C. Parasite destruction- storing raw/partially cooked fish			<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
Protection from Contamination			IN	OUT	N/O	N/A	COS	REPEAT

Inspector \_\_\_\_\_

Acknowledged Receipt: \_\_\_\_\_

Page 2 of 7

## Food Establishment Inspection Report - FDA

### Protection from Contamination

	IN	OUT	N/O	N/A	COS	REPEAT
15A. Food separated & protected	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
15B. Cleaning equip/utensils/food containers	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
16A. Food-contact surfaces: cleaned & sanitized immersion 171° F and above	<input type="radio"/>	<input checked="" type="radio"/>		<input type="radio"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>

**This item has Notes. See Footnote 3 at end of questionnaire.**

**Fail Notes** 4-501.114 (A-E, F 1&2) *Chemical Sanitization - Temperature, pH, Concentration and Hardness*  
*[The concentration of the quart sanitizer in the spray bottles was too strong (above 400ppm). This needs to be diluted so that the concentration of the sanitizer is maintained between 200-400ppm.]*

16B. Food contact surfaces cleaned and sanitized NMT 194° F, NLT 180° F	<input type="radio"/>	<input type="radio"/>		<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
16C. Mechanical warewashing equipment sanitization food contact surfaces, equip., utensils	<input type="radio"/>	<input type="radio"/>		<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

**This item has Notes. See Footnote 4 at end of questionnaire.**

17. Proper disposition of returned, previously served reconditions, & unsafe food	<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>
---	----------------------------------	-----------------------	--	--	--------------------------	--------------------------

### Time/Temperature Control for Safety Food (TCS Food)

	IN	OUT	N/O	N/A	COS	REPEAT
18A. Proper cooking time & temperatures	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
18B. Whole meat cooking and serving, storing	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
18C. Microwave cooking of raw animal foods	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
19. Proper reheating procedures for hot holding	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
20. Proper cooling time & temperatures	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
21. Proper hot holding temperatures	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

**Fail Notes** 3-501.16 (A) *\*Hot TCS foods Maintained at or Above 135oF, Also for whole meat roasts (130F and above)*  
*[The temperature of the chicken nuggets in the hot holding unit was 128.7 deg F. The hot holding unit needs to be adjusted so that temperature of the food is maintained at 135 deg F or above to prevent the growth of pathogenic bacteria and/or toxin production.]*

22. Proper cold holding temperatures	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
--------------------------------------	-----------------------	----------------------------------	-----------------------	-----------------------	--------------------------	--------------------------

**Fail Notes** 3-501.16(A2 &B) *\*Cold PHFs Maintained at or Below 41oF- also pertains to untreated eggs (45F)*  
*[The cheese sandwiches were being stored at a temperature of 53.1 deg F. The temperature of the chilled cabinet which was storing milk and water was 54.9 deg F. These food items need to be stored at a temperature of 41 deg F or less.]*

23. Proper Date Marking	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
23B. TCS Foods Disposition	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
24A. Time as a public health control: procedures	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
24B. Time as a public health control: temperatures & discarding food	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

Inspector \_\_\_\_\_

Acknowledged Receipt: \_\_\_\_\_

Page 3 of 7

## Food Establishment Inspection Report - FDA

Time/Temperature Control for Safety Food (TCS Food)	IN	OUT	N/O	N/A	COS	REPEAT
24C. Time as a public health control: highly susceptible population (HSP)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
Consumer Advisory	IN	OUT	N/O	N/A	COS	REPEAT
25. Consumer advisory provided for raw or undercooked foods	<input checked="" type="radio"/>	<input type="radio"/>		<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
Highly Susceptible Populations (HSP)	IN	OUT	N/O	N/A	COS	REPEAT
26A. Pasteurized foods used; prohibited foods not offered	<input checked="" type="radio"/>	<input type="radio"/>		<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
26B. Reservice of foods	<input checked="" type="radio"/>	<input type="radio"/>		<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
Chemical	IN	OUT	N/O	N/A	COS	REPEAT
27. Food additives: approved and properly used	<input checked="" type="radio"/>	<input type="radio"/>		<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
28A. Toxic substances identified, stored and used	<input checked="" type="radio"/>	<input type="radio"/>		<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
28B. Poisonous materials, sanitizers, additives, medicines restriction, separation, storage	<input checked="" type="radio"/>	<input type="radio"/>		<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
28C. Conditions of Use: law	<input checked="" type="radio"/>	<input type="radio"/>		<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
Conformance with Approved Procedures	IN	OUT	N/O	N/A	COS	REPEAT
29A. Compliance with variance, specialized process, & HACCP plan	<input type="radio"/>	<input type="radio"/>		<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
29B. Treating juice- HACCP, reduced oxygen packaging w/out variance, conformance with approved procedures	<input type="radio"/>	<input type="radio"/>		<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
29C. When HACCP plan is required	<input type="radio"/>	<input type="radio"/>		<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

### GOOD RETAIL PRACTICES

Good Retail Practices are preventative measures to control the addition of pathogens, chemicals, and physical objects into foods.

IN = In compliance    OUT = not in compliance    COS - corrected on -site during inspection    REPEAT = repeat violation

Safe Food and Water	IN	OUT	N/O	N/A	COS	REPEAT
30. Pasteurized eggs used where required	<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>
31A. Water & ice from approved source	<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>
31B. Sampling, alternative water supply	<input type="radio"/>	<input type="radio"/>		<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
31C. Sampling report	<input type="radio"/>	<input type="radio"/>		<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
32. Variance obtained for specialized processing methods	<input type="radio"/>	<input type="radio"/>		<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
Food Temperature Control	IN	OUT	N/O	N/A	COS	REPEAT
33A. Proper cooling methods used; adequate equipment for temperature control	<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>
33B. Frozen food	<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>
34. Plant food properly cooked for hot holding	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
35. Approved thawing methods used	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
36A. Thermometers provided and accurate	<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>
36B. Thermometers function properly	<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>

Inspector \_\_\_\_\_

Acknowledged Receipt: \_\_\_\_\_

Page 4 of 7

## Food Establishment Inspection Report - FDA

Food Identification		IN	OUT	COS	REPEAT
37A. Food properly labeled; original container		<input type="radio"/>	<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
<i>Fail Notes</i>	3-602.11 (A, B 1-4, 6, 7) <i>Packaged foods- properly labeled</i> <i>[The packaged yogurt boxes and the sandwiches did not contain a list of ingredients. Packaged foods need to have a list of ingredients to accurately describe all of the ingredients present in the food.]</i>				
37B. Food labels, labeling of ingredients		<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
Prevention of Food Contamination		IN	OUT	COS	REPEAT
38A. Insects, rodents, & animals not present		<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
38B. Handling prohibition, controlling pests, prohibiting animals		<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
39A. Contamination prevented during food storage		<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
39B. Food display; ice used as an exterior coolant prohibited as an ingredient		<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
39C. Consumer self-service operations- utensils and monitoring		<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
40A. Personal cleanliness- prohibition jewelry		<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
40B. Maintenance of fingernails		<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
41. Wiping cloths; properly used and stored		<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
42A. Washing Produce - following chemical manufacturers label		<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
42B. Washing produce		<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
42C. Washing produce- chemicals		<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
Proper Use of Utensils		IN	OUT	COS	REPEAT
43. In-use utensils; properly stored		<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
44. Utensils, equipment & linens; properly stored, dried, and handled		<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
45A. Single-use/ single service articles properly stored and used, required		<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
45B. Single-use/service articles use limitation, kitchenware and tableware preventing contamination		<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
46. Gloves used properly		<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
Utensils, Equipment and Vending		IN	OUT	COS	REPEAT
47A. Food & non-food contact surfaces cleanable		<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
47B. Food contact surfaces /utensils cleanability, molluscan shellfish tanks, consumer self-service		<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
47C. Properly designed characteristics: food and non-food contact surfaces, molluscan shellfish tanks		<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
48A. Warewashing facilities: installed, maintained, & used; test strips		<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
48B. Operational warewashing machines		<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
49. Non-food contact surfaces clean		<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

Inspector \_\_\_\_\_

Acknowledged Receipt: \_\_\_\_\_

Page 5 of 7

## Food Establishment Inspection Report - FDA

### Physical Facilities

	IN	OUT	N/A	COS	REPEAT
50. Hot & cold water available; adequate pressure	<input checked="" type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>
51A. Plumbing installed; proper backflow devices	<input checked="" type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>
51B. Prohibiting a cross-connection, inspection and servicing system	<input checked="" type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>
51C. Approved system and cleanable fixtures, service sink	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
52A. Sewage and waste water properly disposed	<input checked="" type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>
52B. Grease traps easily accessible for cleaning	<input checked="" type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>
52C. Removing mobile food establishment waste	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
53A. Toilet facilities; properly constructed, supplied, & cleaned	<input checked="" type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>
53B. Toilet tissue availability	<input checked="" type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>
54. Garbage & refuse properly disposed; facilities maintained	<input checked="" type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>
55A. Physical facilities installed, maintained, & clean	<input checked="" type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>
55B. Private homes and living or sleeping quarters, use prohibition	<input checked="" type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>
56. Adequate ventilation & lighting; designated areas used	<input type="radio"/>	<input checked="" type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>

**This item has Notes. See Footnote 5 at end of questionnaire.**

Fail Notes    6-304.11    *Mechanical-Ventilation*  
*[The mechanical ventilation system is not in working order and so the kitchen was very hot. Mechanical ventilation is needed to remove odours and also ensure that soiling of walls, ceilings and other equipment is minimised.]*

### MASSACHUSETTS ONLY REGULATIONS

Rules and Regulations adopted for use in Massachusetts only.

#### Facilities

	IN	OUT	COS	REPEAT
57A. Catering	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
57B. When plans are reviewed, prerequisite for operations- valid permit	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
57C. Contents of plans and specifications, preoperational inspections	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
58. Mobile Food Operations	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
59. Temporary Food Establishments	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
60. Residential Kitchens	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

#### Procedures

	IN	OUT	COS	REPEAT
61. Anti-choking Procedures	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
62. Tobacco Products: Notice and Sale	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
63. Food Allergy Awareness Requirements	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

Inspector \_\_\_\_\_

Acknowledged Receipt: \_\_\_\_\_

Page 6 of 7

## Food Establishment Inspection Report - FDA

### **Footnote 1**

**Notes:**

The PIC, Julie, had been employed for 2 months at time of inspection and was still waiting to attend a food hygiene course.

### **Footnote 2**

**Notes:**

The PIC informed me that there had not been any soap or paper towels/hand dryer since she started working in the kitchen 2 months ago.

### **Footnote 3**

**Notes:**

The dispenser for the detergent and sanitizer was not working so the PIC was pouring the detergent and sanitizer manually into the sinks. The PIC also corrected the dilution of the sanitizer at time of the inspection.

### **Footnote 4**

**Notes:**

The kitchen does not have a dishwasher.

### **Footnote 5**

**Notes:**

The kitchen was hot at the time of inspection. The windows were not open and so the PIC was leaving the kitchen door open which is not advisable (unauthorised access).



City of Newton  
Health and Human Services  
Deborah Youngblood, PhD, Commissioner  
1000 Commonwealth Ave Newton, MA 02459  
(617) 796-1420



Public Health  
Prevent. Promote. Protect.

Food Establishment Inspection Report - FDA

Insp Date: 6/6/2018  
Business: Bowen School  
280 Cypress St.

Business ID: 1N2077

Newton, MA 02459

Inspection: 4N000454

Section: 2

Phone: 559-9330

Inspector: 1N11124 Samantha Menard

Reason: 1-Routine

Results: No Follow-up

Inspection Summary

Official Order for Correction: Based on an inspection today, the items checked indicate violations of 105 CMR 590.000/ 2009 Federal Food Code. This report, when signed below by the Commissioner of Health / Agent constitutes an order by the Commissioner of Health. Failure to correct violations cited in this report may result in suspension or revocation of the food establishment permit and cessation of food establishment operations. If aggrieved by this order, you have the right to a hearing. The request must be in writing and submitted to the Commissioner of Health at the above address within 10 days of receipt of this order.

Est. Type 1 - Food Svc Establish License/Permit # \_\_\_\_\_ Risk Category 02 Risk Level Observed 02 Low

FOODBORNE ILLNESS RISK FACTORS AND PUBLIC HEALTH INTERVENTIONS

Compliance status: IN = in compliance OUT = not in compliance N/O = not observed N/A = not applicable

Marked in appropriate box for COS and/or R. COS = corrected on-site during inspection R = repeat violation

Risk factors are improper practices or procedures identified as the most prevalent contributing factors of foodborne illness or injury. Public Health interventions are control measures to prevent foodborne illnesses or injury.

Supervision

1A. PIC Present

IN OUT N/O N/A COS REPEAT

☒ ☐ ☐ ☐ ☐ ☐

B. Cert. food manager, knowledge, no critical violations

☒ ☐ ☐ ☐ ☐ ☐

C. Duties of PIC

☒ ☐ ☐ ☐ ☐ ☐

Employee Health

2. Management, food employee and conditional employee; knowledge, responsibilities and reporting

IN OUT N/O N/A COS REPEAT

☒ ☐ ☐ ☐ ☐ ☐

3. Proper use of restriction and exclusion

☒ ☐ ☐ ☐ ☐ ☐

Good Hygienic Practices

4A. Proper eating, tasting, drinking, or tobacco use

IN OUT N/O N/A COS REPEAT

☒ ☐ ☐ ☐ ☐ ☐

B. Preventing contamination when tasting

☒ ☐ ☐ ☐ ☐ ☐

5. No discharge from eyes, nose, and mouth

☒ ☐ ☐ ☐ ☐ ☐

*Samantha Menard*

Inspector

Acknowledged Receipt :

Page 1 of 5

## Food Establishment Inspection Report - FDA

### Preventing Contamination by Hands

	IN	OUT	N/O	N/A	COS	REPEAT
6A. Hands clean & properly washed	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>
B. Where to wash, hand antiseptics	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>
7. No bare hand contact with RTE food or a pre-approved alternative procedure properly allowed	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
8A. Adequate handwashing sinks properly supplied and accessible	<input type="radio"/>	<input checked="" type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>

*Fail Notes*

6-301.11 *Handwashing Cleanser, Availability*  
*[Soap was located above 2-bay sink and not above the hand washing sink. Soap should be moved to be readily accessible to workers at the hand sink. ]*

6-301.12 *Hand Drying Provision*  
*[The paper towel dispenser was located above 2-bay sink and not above the hand washing sink. Paper towel dispenser should be moved to be readily accessible to workers at the hand sink. ]*

B. Handwashing sinks accessible with proper signage, handwashing aids	<input type="radio"/>	<input checked="" type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>
---	-----------------------	----------------------------------	--	--	--------------------------	--------------------------

*Fail Notes*

6-301.14 *Handwashing signage*  
*[The handwashing signage was located above the 2-bay sink. This signage should be moved above the hand washing sink to avoid confusion.]*

C. Conveniently located handwashing sink	<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>
--	----------------------------------	-----------------------	--	--	--------------------------	--------------------------

### Approved Sources

	IN	OUT	N/O	N/A	COS	REPEAT
9A. Milk, eggs, juice, bottled water, hermetically sealed food	<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>
B. Fish and shellfish	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
10. Food received at proper temperature	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
11. Food in good condition, safe, & unadulterated	<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>

### Protection from Contamination

	IN	OUT	N/O	N/A	COS	REPEAT
12A. Food separated & protected	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
B. Gloves, use limitation, one task- contaminated	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
13A. Food-contact surfaces: cleaned & sanitized 171° F	<input checked="" type="radio"/>	<input type="radio"/>		<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
B. Food contact surfaces cleaned and sanitized NMT 194° F, NLT 180° F	<input type="radio"/>	<input type="radio"/>		<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
C. Mechanical warewashing equipment sanitization food contact surfaces, equip., utensils	<input checked="" type="radio"/>	<input type="radio"/>		<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
14. Proper disposition of returned, previously served reconditions, & unsafe food	<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>

### Potentially Hazardous Food Time/Temperature

	IN	OUT	N/O	N/A	COS	REPEAT
15. Proper cooking time & temperatures	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
16. Proper reheating procedures for hot holding	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
17. Proper cooling time & temperatures	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
18. Proper hot holding temperatures	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
19. Proper cold holding temperatures	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

*Sam Menard*

Inspector

Acknowledged Receipt :

Page 2 of 5

## Food Establishment Inspection Report - FDA

Potentially Hazardous Food Time/Temperature	IN	OUT	N/O	N/A	COS	REPEAT
---	----	-----	-----	-----	-----	--------

20. Time as a public health control: procedures & record

☐ IN   ☐ OUT   ☐ N/O   ☒ N/A   ☐ COS   ☐ REPEAT

Highly Susceptible Populations	IN	OUT	N/O	N/A	COS	REPEAT
--------------------------------	----	-----	-----	-----	-----	--------

21. Pasteurized foods used; prohibited foods not offered

☐ IN   ☐ OUT   ☐ N/O   ☒ N/A   ☐ COS   ☐ REPEAT

Chemical	IN	OUT	N/O	N/A	COS	REPEAT
----------	----	-----	-----	-----	-----	--------

22. Food additives: approved and properly used

☐ IN   ☐ OUT   ☐ N/O   ☒ N/A   ☐ COS   ☐ REPEAT

23A. Toxic substances properly identified, stored and used

☒ IN   ☐ OUT   ☐ N/O   ☐ N/A   ☐ COS   ☐ REPEAT

B. Restriction presence and use, restriction and storage of medicines

☒ IN   ☐ OUT   ☐ N/O   ☐ N/A   ☐ COS   ☐ REPEAT

C. Storage- other personal care items

☒ IN   ☐ OUT   ☐ N/O   ☐ N/A   ☐ COS   ☐ REPEAT

### GOOD RETAIL PRACTICES

Good Retail Practices are preventative measures to control the addition of pathogens, chemicals, and physical objects into foods.

IN = In compliance   OUT = not in compliance   COS - corrected on -site during inspection   REPEAT = repeat violation

Safe Food and Water	IN	OUT	N/O	N/A	COS	REPEAT
---------------------	----	-----	-----	-----	-----	--------

24. Water & ice from approved source

☒ IN   ☐ OUT   ☐ N/O   ☐ N/A   ☐ COS   ☐ REPEAT

Food Temperature Control	IN	OUT	N/O	N/A	COS	REPEAT
--------------------------	----	-----	-----	-----	-----	--------

25A. Proper cooling methods used; adequate equipment for temperature control

☐ IN   ☐ OUT   ☐ N/O   ☒ N/A   ☐ COS   ☐ REPEAT

B. Frozen food

☒ IN   ☐ OUT   ☐ N/O   ☐ N/A   ☐ COS   ☐ REPEAT

26. Plant food properly cooked for hot holding

☐ IN   ☐ OUT   ☒ N/O   ☐ N/A   ☐ COS   ☐ REPEAT

27. Approved thawing methods used

☒ IN   ☐ OUT   ☐ N/O   ☐ N/A   ☐ COS   ☐ REPEAT

28A. Thermometers provided and accurate

☒ IN   ☐ OUT   ☐ N/O   ☐ N/A   ☐ COS   ☐ REPEAT

B. Thermometers function properly

☒ IN   ☐ OUT   ☐ N/O   ☐ N/A   ☐ COS   ☐ REPEAT

Food Identification	IN	OUT	COS	REPEAT
---------------------	----	-----	-----	--------

29A. Food properly labeled; original container

☒ IN   ☐ OUT   ☐ COS   ☐ REPEAT

B. Food labels, labeling of ingredients

☒ IN   ☐ OUT   ☐ COS   ☐ REPEAT

Prevention of Food Contamination	IN	OUT	COS	REPEAT
----------------------------------	----	-----	-----	--------

30A. Insects, rodents, & animals not present

☒ IN   ☐ OUT   ☐ COS   ☐ REPEAT

B. Handling prohibition, controlling pests, prohibiting animals

☒ IN   ☐ OUT   ☐ COS   ☐ REPEAT

31A. Contamination prevented during food storage

☒ IN   ☐ OUT   ☐ COS   ☐ REPEAT

B. Food display; ice used as an exterior coolant prohibited as an ingredient

☒ IN   ☐ OUT   ☐ COS   ☐ REPEAT

C. Consumer self-service operations- utensils and monitoring

☒ IN   ☐ OUT   ☐ COS   ☐ REPEAT

32A. Personal cleanliness- prohibition jewelry

☐ IN   ☒ OUT   ☒ COS   ☐ REPEAT

Fail Notes   2-303.11

Prohibition-Jewelry

[PIC was wearing a bracelet with key for kitchen attached while preparing food. PIC was advised to not wear jewelry on arms or hands while preparing food (corrected on site). ]

*Sam Menard*

Inspector

Acknowledged Receipt :

Page 3 of 5

## Food Establishment Inspection Report - FDA

### Prevention of Food Contamination

	IN	OUT	COS	REPEAT
B. Maintenance of fingernails	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
33. Wiping cloths; properly used and stored	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
34. Washing fruits & vegetables	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

### Proper Use of Utensils

	IN	OUT	COS	REPEAT
35. In-use utensils; properly stored	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
36. Utensils, equipment & linens; properly stored, dried, and handled	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
37A. Single-use/ single service articles properly stored and used, required	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
B. Single-use/service articles use limitation, kitchenware and tableware preventing contamination	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
38. Gloves used properly	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

### Utensils, Equipment and Vending

	IN	OUT	COS	REPEAT
39A. Food & non-food contact surfaces cleanable	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
B. Food contact surfaces /utensils cleanability, molluscan shellfish tanks, consumer self-service	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
C. Properly designed characteristics: food and non-food contact surfaces, molluscan shellfish tanks	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
40A. Warewashing facilities: installed, maintained, & used; test strips	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
B. Operational warewashing machines	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
41. Non-food contact surfaces clean	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

### Physical Facilities

	IN	OUT	N/O	N/A	COS	REPEAT
42. Hot & cold water available; adequate pressure	<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>
43A. Plumbing installed; proper backflow devices	<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>
B. Prohibiting a cross-connection, non-drinking water, system maintained in good repair	<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>
C. Approved system and cleanable fixtures, service sink	<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>
44A. Sewage and waste water properly disposed	<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>
B. Grease traps easily accessible for cleaning	<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>
45A. Toilet facilities; properly constructed, supplied, & cleaned	<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>
B. Toilet tissue availability	<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>
46. Garbage & refuse properly disposed; facilities maintained	<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>
47A. Physical facilities installed, maintained, & clean	<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>
B. Cleaning maintenance tools, preventing contamination	<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>
48. Adequate ventilation & lighting; designated areas used	<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>

### MASSACHUSETTS ONLY REGULATIONS

Rules and Regulations adopted for use in Massachusetts only.

*Sam Menard*

Inspector

Acknowledged Receipt :

Page 4 of 5

## Food Establishment Inspection Report - FDA

### Facilities

49A. When plans are reviewed, prerequisite for operations- valid permit

IN OUT COS REPEAT

☐ ☐ ☐ ☐

B. Contents of plans and specifications, preoperational inspections

☐ ☐ ☐ ☐

### Procedures

50. Anti-choking Procedures

IN OUT COS REPEAT

☒ ☐ ☐ ☐

51. Tobacco Products: Notice and Sale

☐ ☐ ☐ ☐



Inspector

Acknowledged Receipt :

Page 5 of 5



**City of Newton**  
**Health and Human Services**  
 Deborah Youngblood, PhD, Commissioner  
 1000 Commonwealth Ave Newton, MA 02459  
 (617) 796-1420



**Public Health**  
 Prevent. Promote. Protect.

**Food Establishment Inspection Report - FDA**

**Insp Date:** 11/15/2018    **Business ID:** 1N2077  
**Business:** Bowen School  
 280 Cypress St.

Newton, MA 02459

**Inspection:** 6N000065  
**Section:** 2  
**Phone:** 559-9330  
**Inspector:** 1N11123 Nicola Assan  
**Reason:** 1-Routine  
**Results:** No Follow-up R2

**Inspection Summary**

Official Order for Correction: Based on an inspection today, the items checked indicate violations of 105 CMR 590.000/ 2013 Federal Food Code. This report, when signed below by the Commissioner of Health / Agent constitutes an order by the Commissioner of Health. Failure to correct violations cited in this report may result in suspension or revocation of the food establishment permit and cessation of food establishment operations. If aggrieved by this order, you have the right to a hearing. The request must be in writing and submitted to the Commissioner of Health at the above address within 10 days of receipt of this order.

Est. Type 1 - Food Svc Establish License/Permit # \_\_\_\_\_ Risk Category 02 Risk Level Observed 02 Low

Foodborne Illness Complaint Investigated (All) ☐ Involving More Than Two Persons ☐

**FOODBORNE ILLNESS RISK FACTORS AND PUBLIC HEALTH INTERVENTIONS**

Compliance status: IN = in compliance OUT = not in compliance N/O = not observed N/A = not applicable

Marked in appropriate box for COS and/or R. COS = corrected on-site during inspection R = repeat violation

Risk factors are improper practices or procedures identified as the most prevalent contributing factors of foodborne illness or injury. Public Health Interventions are control measures to prevent foodborne illnesses or injury.

Supervision		IN	OUT	N/O	N/A	COS	REPEAT
1. PIC Present, Knowledge and Duties		⊙	○			□	□
2. Certified Food Protection Manager		○	⊙		○	□	□
<i>Fail Notes</i>	2-102.12 (A) <i>Certified food protection manager [The PIC (person in charge) did not have a serve safe certificate. At least one employee that has supervisory and management responsibility and the authority to direct and control food preparation and service shall be a certified food protection manager who has shown proficiency of required information through passing a test that is part of an accredited program.]</i>						

Employee Health / Responding to Contamination Events		IN	OUT	N/O	N/A	COS	REPEAT
3A. Employee Health: PIC Knowledge, Responsibilities & Reporting		⊙	○			□	□
3B. Employee Reporting to PIC		⊙	○			□	□
4. Proper Use of Restriction & Exclusion		⊙	○			□	□

*Assan*

Inspector

Acknowledged Receipt : Tim Viveiros

Page 1 of 6

## Food Establishment Inspection Report - FDA

Employee Health / Responding to Contamination Events	IN	OUT	N/O	N/A	COS	REPEAT
--	----	-----	-----	-----	-----	--------

5. Clean-up of Vomiting and Diarrheal Events

☒ ☐ ☐ ☐ ☐ ☐

Good Hygienic Practices	IN	OUT	N/O	N/A	COS	REPEAT
-------------------------	----	-----	-----	-----	-----	--------

6A. Proper eating, tasting, drinking, or tobacco use

☒ ☐ ☐ ☐ ☐ ☐

6B. Preventing contamination when tasting

☒ ☐ ☐ ☐ ☐ ☐

7. No discharge from eyes, nose, and mouth

☒ ☐ ☐ ☐ ☐ ☐

Control of Hands as a Vehicle of Contamination	IN	OUT	N/O	N/A	COS	REPEAT
--	----	-----	-----	-----	-----	--------

8A. Hands clean & properly washed

☒ ☐ ☐ ☐ ☐ ☐

8B. Where to wash, hand antiseptics

☒ ☐ ☐ ☐ ☐ ☐

9. No bare hand contact with RTE food or a pre-approved alternative procedure properly allowed

☒ ☐ ☐ ☐ ☐ ☐

10A. Adequate handwashing sinks properly supplied and accessible

☐ ☒ ☐ ☐ ☐ ☐

Fail Notes	6-301.11	Handwashing Cleanser, Availability [Although there was handwashing cleanser available, the dispenser was located above the 2 bay sink and not above the handwashing sink. The soap dispenser should be moved to be readily accessible to food handlers using the hand sink.]
	6-301.12	Hand Drying Provision [The paper towel dispenser was located above the 2 bay sink and not above the handwashing sink. The paper towel dispenser should be moved to be readily accessible to food handlers using the hand sink.]

10B. Handwashing sinks accessible with proper signage, handwashing aids

☐ ☒ ☐ ☐ ☐ ☐

Fail Notes	6-301.14	Handwashing signage [There was no handwashing signage at the hand sink. A sign or poster that notifies food employees to wash their hands shall be provided at all hand sinks used by food employees and shall be clearly visible to food employees.]
------------	----------	--

Approved Sources	IN	OUT	N/O	N/A	COS	REPEAT
------------------	----	-----	-----	-----	-----	--------

11A. Milk, eggs, juice, bottled water, hermetically sealed food, game animals

☒ ☐ ☐ ☐ ☐ ☐

11B. Packaged foods, labeling, whole muscle beef

☒ ☐ ☐ ☐ ☐ ☐

11C. Obtaining raw fish, packaged meat & poultry, eggs

☐ ☐ ☐ ☒ ☐ ☐

12A. Food received at proper temperature

☐ ☐ ☒ ☐ ☐ ☐

12B. Shipping and receiving frozen food

☐ ☐ ☒ ☐ ☐ ☐

13. Food in good condition, honestly presented, safe, & unadulterated

☒ ☐ ☐ ☐ ☐ ☐

13B. Food package integrity

☒ ☐ ☐ ☐ ☐ ☐

14A. Required records available: shellstock tags, parasite destruction

☐ ☐ ☐ ☒ ☐ ☐

14B. Missing shellstock tags, destruction

☐ ☐ ☐ ☒ ☐ ☐

14C. Parasite destruction- storing raw/partially cooked fish

☐ ☐ ☐ ☒ ☐ ☐

Protection from Contamination	IN	OUT	N/O	N/A	COS	REPEAT
-------------------------------	----	-----	-----	-----	-----	--------

IN OUT N/O N/A COS REPEAT

*Asson*

Inspector

Acknowledged Receipt : Tim Viveiros

Page 2 of 6

## Food Establishment Inspection Report - FDA

### Protection from Contamination

	IN	OUT	N/O	N/A	COS	REPEAT
15A. Food separated & protected	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
15B. Cleaning equip/utensils/food containers	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
16A. Food-contact surfaces: cleaned & sanitized immersion 171° F and above	<input checked="" type="radio"/>	<input type="radio"/>		<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
16B. Food contact surfaces cleaned and sanitized NMT 194° F, NLT 180° F	<input checked="" type="radio"/>	<input type="radio"/>		<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
16C. Mechanical warewashing equipment sanitization food contact surfaces, equip., utensils	<input type="radio"/>	<input type="radio"/>		<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
17. Proper disposition of returned, previously served reconditions, & unsafe food	<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>

### Time/Temperature Control for Safety Food (TCS Food)

	IN	OUT	N/O	N/A	COS	REPEAT
18A. Proper cooking time & temperatures	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
18B. Whole meat cooking and serving, storing	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
18C. Microwave cooking of raw animal foods	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
19. Proper reheating procedures for hot holding	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
20. Proper cooling time & temperatures	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
21. Proper hot holding temperatures	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
22. Proper cold holding temperatures	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

**Fail Notes** | 3-501.16(A2 &B) \*Cold PHFs Maintained at or Below 41oF- also pertains to untreated eggs (45F)  
*[The temperature of the food in the refrigerator was 43.2 degrees F and the temperature of the chicken wraps in the milk/water chilled cabinet ranged from 43.5 and 53.8 degrees F. The temperature of TCS (time/temperature control for safety foods) food shall be maintained at 41 degrees F and below.]*

23. Proper Date Marking	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
23B. TCS Foods Disposition	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
24A. Time as a public health control: procedures	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
24B. Time as a public health control: temperatures & discarding food	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
24C. Time as a public health control: highly susceptible population (HSP)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

### Consumer Advisory

25. Consumer advisory provided for raw or undercooked foods	<input type="radio"/>	<input type="radio"/>		<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
---	-----------------------	-----------------------	--	----------------------------------	--------------------------	--------------------------

### Highly Susceptible Populations (HSP)

	IN	OUT	N/O	N/A	COS	REPEAT
26A. Pasteurized foods used; prohibited foods not offered	<input type="radio"/>	<input type="radio"/>		<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
26B. Reservice of foods	<input type="radio"/>	<input type="radio"/>		<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

### Chemical

	IN	OUT	N/O	N/A	COS	REPEAT
27. Food additives: approved and properly used	<input type="radio"/>	<input type="radio"/>		<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
28A. Toxic substances identified, stored and used	<input checked="" type="radio"/>	<input type="radio"/>		<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
28B. Poisonous materials, sanitizers, additives, medicines restriction, separation, storage	<input checked="" type="radio"/>	<input type="radio"/>		<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

*Asson*

Inspector

Acknowledged Receipt : Tim Viveiros

Page 3 of 6

## Food Establishment Inspection Report - FDA

### Chemical

28C. Conditions of Use: law

IN	OUT	N/O	N/A	COS	REPEAT
<input checked="" type="radio"/>	<input type="radio"/>		<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

### Conformance with Approved Procedures

29A. Compliance with variance, specialized process, & HACCP plan

<input type="radio"/>	<input type="radio"/>		<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
-----------------------	-----------------------	--	----------------------------------	--------------------------	--------------------------

29B. Treating juice- HACCP, reduced oxygen packaging w/out variance, conformance with approved procedures

<input type="radio"/>	<input type="radio"/>		<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
-----------------------	-----------------------	--	----------------------------------	--------------------------	--------------------------

29C. When HACCP plan is required

<input type="radio"/>	<input type="radio"/>		<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
-----------------------	-----------------------	--	----------------------------------	--------------------------	--------------------------

### GOOD RETAIL PRACTICES

Good Retail Practices are preventative measures to control the addition of pathogens, chemicals, and physical objects into foods.

IN = In compliance    OUT = not in compliance    COS - corrected on -site during inspection    REPEAT = repeat violation

### Safe Food and Water

30. Pasteurized eggs used where required

<input type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>
-----------------------	-----------------------	--	--	--------------------------	--------------------------

31A. Water & ice from approved source

<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>
----------------------------------	-----------------------	--	--	--------------------------	--------------------------

31B. Sampling, alternative water supply

<input type="radio"/>	<input type="radio"/>		<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
-----------------------	-----------------------	--	----------------------------------	--------------------------	--------------------------

31C. Sampling report

<input type="radio"/>	<input type="radio"/>		<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
-----------------------	-----------------------	--	----------------------------------	--------------------------	--------------------------

32. Variance obtained for specialized processing methods

<input type="radio"/>	<input type="radio"/>		<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
-----------------------	-----------------------	--	----------------------------------	--------------------------	--------------------------

### Food Temperature Control

33A. Proper cooling methods used; adequate equipment for temperature control

<input type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>
-----------------------	-----------------------	--	--	--------------------------	--------------------------

33B. Frozen food

<input type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>
-----------------------	-----------------------	--	--	--------------------------	--------------------------

34. Plant food properly cooked for hot holding

<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
-----------------------	-----------------------	----------------------------------	-----------------------	--------------------------	--------------------------

35. Approved thawing methods used

<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
-----------------------	-----------------------	-----------------------	----------------------------------	--------------------------	--------------------------

36A. Thermometers provided and accurate

<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>
----------------------------------	-----------------------	--	--	--------------------------	--------------------------

36B. Thermometers function properly

<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>
----------------------------------	-----------------------	--	--	--------------------------	--------------------------

### Food Identification

37A. Food properly labeled; original container

IN	OUT	COS	REPEAT
<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

37B. Food labels, labeling of ingredients

<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
----------------------------------	-----------------------	--------------------------	--------------------------

### Prevention of Food Contamination

38A. Insects, rodents, & animals not present

<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
----------------------------------	-----------------------	--------------------------	--------------------------

38B. Handling prohibition, controlling pests, prohibiting animals

<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
----------------------------------	-----------------------	--------------------------	--------------------------

39A. Contamination prevented during food storage

<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
----------------------------------	-----------------------	--------------------------	--------------------------

39B. Food display; ice used as an exterior coolant prohibited as an ingredient

<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
----------------------------------	-----------------------	--------------------------	--------------------------

39C. Consumer self-service operations- utensils and monitoring

<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
----------------------------------	-----------------------	--------------------------	--------------------------

40A. Personal cleanliness- prohibition jewelry

<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
----------------------------------	-----------------------	--------------------------	--------------------------

40B. Maintenance of fingernails

<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
----------------------------------	-----------------------	--------------------------	--------------------------

*Asson*

Inspector

Acknowledged Receipt : Tim Viveiros

Page 4 of 6

## Food Establishment Inspection Report - FDA

Prevention of Food Contamination		IN	OUT	COS	REPEAT	
41. Wiping cloths; properly used and stored		<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>	
42A. Washing Produce - following chemical manufacturers label		<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>	
42B. Washing produce		<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>	
42C. Washing produce- chemicals		<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Proper Use of Utensils		IN	OUT	COS	REPEAT	
43. In-use utensils; properly stored		<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>	
44. Utensils, equipment & linens; properly stored, dried, and handled		<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>	
45A. Single-use/ single service articles properly stored and used, required		<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>	
45B. Single-use/service articles use limitation, kitchenware and tableware preventing contamination		<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>	
46. Gloves used properly		<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Utensils, Equipment and Vending		IN	OUT	COS	REPEAT	
47A. Food & non-food contact surfaces cleanable		<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>	
47B. Food contact surfaces /utensils cleanability, molluscan shellfish tanks, consumer self-service		<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>	
47C. Properly designed characteristics: food and non-food contact surfaces, molluscan shellfish tanks		<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>	
48A. Warewashing facilities: installed, maintained, & used; test strips		<input type="radio"/>	<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Fail Notes	<div style="border: 1px solid black; padding: 5px;"> <p>4-501.19 Manual warewashing equipment, wash solution temperature [The temperature of the wash solution in the 2 bay sink was 96.4 degrees F. The temperature of the wash solution in manual warewashing equipment shall be maintained at not less than 110 degrees F or the temperature specified on the cleaning agent manufacturer's label instructions.]</p> </div>					
48B. Operational warewashing machines		<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>	
49. Non-food contact surfaces clean		<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Physical Facilities		IN	OUT	N/A	COS	REPEAT
50. Hot & cold water available; adequate pressure		<input checked="" type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>
51A. Plumbing installed; proper backflow devices		<input checked="" type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>
51B. Prohibiting a cross-connection, inspection and servicing system		<input checked="" type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>
51C. Approved system and cleanable fixtures, service sink		<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
52A. Sewage and waste water properly disposed		<input checked="" type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>
52B. Grease traps easily accessible for cleaning		<input type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>
52C. Removing mobile food establishment waste		<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
53A. Toilet facilities; properly constructed, supplied, & cleaned		<input checked="" type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>
53B. Toilet tissue availability		<input checked="" type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>
54. Garbage & refuse properly disposed; facilities maintained		<input checked="" type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>

*Asson*

Inspector

Acknowledged Receipt : Tim Viveiros

Page 5 of 6

## Food Establishment Inspection Report - FDA

### Physical Facilities

	IN	OUT	N/A	COS	REPEAT
55A. Physical facilities installed, maintained, & clean	<input checked="" type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>
55B. Private homes and living or sleeping quarters, use prohibition	<input checked="" type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>
56. Adequate ventilation & lighting; designated areas used	<input checked="" type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>

### MASSACHUSETTS ONLY REGULATIONS

Rules and Regulations adopted for use in Massachusetts only.

### Facilities

	IN	OUT	COS	REPEAT
57A. Catering	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
57B. When plans are reviewed, prerequisite for operations- valid permit	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
57C. Contents of plans and specifications, preoperational inspections	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
58. Mobile Food Operations	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
59. Temporary Food Establishments	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
60. Residential Kitchens	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

### Procedures

	IN	OUT	COS	REPEAT
61. Anti-choking Procedures	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
62. Tobacco Products: Notice and Sale	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
63. Food Allergy Awareness Requirements	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

*Asson*

Inspector

Acknowledged Receipt : Tim Viveiros

Page 6 of 6



City of Newton  
Health and Human Services  
Deborah Youngblood, PhD, Commissioner  
1000 Commonwealth Ave Newton, MA 02459  
(617) 796-1420



Public Health  
Prevent. Promote. Protect.

Food Establishment Inspection Report - FDA

Insp Date: 3/7/2019  
Business: Bowen School  
280 Cypress St.

Business ID: 1N2077

Newton, MA 02459

Inspection: 6N000086  
Section: 2  
Phone: 559-9330  
Inspector: 1N11123 Nicola Assan  
Reason: 1-Routine  
Results: No Follow-up R2

Inspection Summary

Official Order for Correction: Based on an inspection today, the items checked indicate violations of 105 CMR 590.000/ 2013 Federal Food Code. This report, when signed below by the Commissioner of Health / Agent constitutes an order by the Commissioner of Health. Failure to correct violations cited in this report may result in suspension or revocation of the food establishment permit and cessation of food establishment operations. If aggrieved by this order, you have the right to a hearing. The request must be in writing and submitted to the Commissioner of Health at the above address within 10 days of receipt of this order.

Est. Type 1 - Food Svc Establis License/Permit # \_\_\_\_\_ Risk Category 02 Risk Level Observed 02 Low

Foodborne Illness Complaint Investigated (All) ☐ Involving More Than Two Persons ☐

FOODBORNE ILLNESS RISK FACTORS AND PUBLIC HEALTH INTERVENTIONS

Compliance status: IN = in compliance OUT = not in compliance N/O = not observed N/A = not applicable

Marked in appropriate box for COS and/or R. COS = corrected on-site during inspection R = repeat violation

Risk factors are improper practices or procedures identified as the most prevalent contributing factors of foodborne illness or injury. Public Health Interventions are control measures to prevent foodborne illnesses or injury.

Supervision

1. PIC Present, Knowledge and Duties
2. Certified Food Protection Manager

IN	OUT	N/O	N/A	COS	REPEAT
<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>
<input type="radio"/>	<input checked="" type="radio"/>		<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

**This item has Notes. See Footnote 1 at end of questionnaire.**

Fail Notes 2-102.12 (A) *Certified food protection manager [The PIC (person in charge) did not a serve safe certificate. At least one employee that has supervisory and management responsibility and the authority to direct and control food preparation and service must have shown proficiency of required information through passing a test that is part of an accredited program.]*

Employee Health / Responding to Contamination Events

- 3A. Employee Health: PIC Knowledge, Responsibilities & Reporting
- 3B. Employee Reporting to PIC

IN	OUT	N/O	N/A	COS	REPEAT
<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>
<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>

*Assan*

Inspector

Acknowledged Receipt : Tim Viveiros

Page 1 of 7

## Food Establishment Inspection Report - FDA

### Employee Health / Responding to Contamination Events

4. Proper Use of Restriction & Exclusion

IN OUT N/O N/A COS REPEAT  
☒ ☐ ☐ ☐ ☐ ☐

5. Clean-up of Vomiting and Diarrheal Events

☒ ☐ ☐ ☐ ☐ ☐

### Good Hygienic Practices

6A. Proper eating, tasting, drinking, or tobacco use

IN OUT N/O N/A COS REPEAT  
☒ ☐ ☐ ☐ ☐ ☐

6B. Preventing contamination when tasting

☒ ☐ ☐ ☐ ☐ ☐

7. No discharge from eyes, nose, and mouth

☒ ☐ ☐ ☐ ☐ ☐

### Control of Hands as a Vehicle of Contamination

8A. Hands clean & properly washed

IN OUT N/O N/A COS REPEAT  
☐ ☒ ☐ ☐ ☐ ☐

Fail Notes

2-301.14

*\*When to Wash*

*[Food employees shall clean their hands and exposed portions of their arms immediately before engaging in food preparation including working with exposed food, clean equipment and utensils, and unwrapped single-use items and after touching bare human body parts other than clean hands and clean, exposed portions of arms; after using the toilet room; after handling animals; after coughing, sneezing, using a handkerchief or disposable tissue, using tobacco, eating or drinking; after handling soiled equipment or utensils, during food preparation, as often as necessary to remove soil and contamination and to prevent cross contamination when changing tasks; when switching between working with raw food and working with RTE (ready-to-eat) food; before donning gloves to initiate a task that involves working with food; and after engaging in other activities that contaminate the hands. Hands shall be washed for at least twenty (20) seconds, using soap. Rinse hands under clean, running water, apply soap, rub together vigorously for at least 10-15 seconds, thoroughly rinse under clean, running warm water and dry.]*

8B. Where to wash, hand antiseptics

☒ ☐ ☐ ☐ ☐ ☐

9. No bare hand contact with RTE food or a pre-approved alternative procedure properly allowed

☒ ☐ ☐ ☐ ☐ ☐

10A. Adequate handwashing sinks properly supplied and accessible

☒ ☐ ☐ ☐ ☐ ☐

10B. Handwashing sinks accesible with proper signage, handwashing aids

☒ ☐ ☐ ☐ ☐ ☐

### Approved Sources

11A. Milk, eggs, juice, bottled water, hermetically sealed food, game animals

IN OUT N/O N/A COS REPEAT  
☒ ☐ ☐ ☐ ☐ ☐

11B. Packaged foods, labeling, whole muscle beef

☐ ☐ ☐ ☒ ☐ ☐

11C. Obtaining raw fish, packaged meat & poultry, eggs

☐ ☐ ☐ ☒ ☐ ☐

12A. Food received at proper temperature

☐ ☐ ☒ ☐ ☐ ☐

12B. Shipping and receiving frozen food

☐ ☐ ☒ ☐ ☐ ☐

13. Food in good condition, honestly presented, safe, & unadulterated

☒ ☐ ☐ ☐ ☐ ☐

13B. Food package integrity

☒ ☐ ☐ ☐ ☐ ☐

14A. Required records available: shellstock tags, parasite destruction

☐ ☐ ☐ ☒ ☐ ☐

*Assoun*

Inspector

Acknowledged Receipt : Tim Viveiros

Page 2 of 7

## Food Establishment Inspection Report - FDA

### Approved Sources

14B. Missing shellstock tags, destruction

IN OUT N/O N/A COS REPEAT  
☐ ☐ ☐ ☒ ☐ ☐

14C. Parasite destruction- storing raw/partially cooked fish

☐ ☐ ☐ ☒ ☐ ☐

### Protection from Contamination

15A. Food separated & protected

☒ ☐ ☐ ☐ ☐ ☐

15B. Cleaning equip/utensils/food containers

☒ ☐ ☐ ☐ ☐ ☐

16A. Food-contact surfaces: cleaned & sanitized immersion 171° F and above

☐ ☐ ☐ ☐ ☐ ☐

16B. Food contact surfaces cleaned and sanitized NMT 194° F, NLT 180° F

☐ ☐ ☐ ☐ ☐ ☐

16C. Mechanical warewashing equipment sanitization food contact surfaces, equip., utensils

☐ ☐ ☐ ☐ ☐ ☐

17. Proper disposition of returned, previously served reconditions, & unsafe food

☐ ☐ ☐ ☐ ☐ ☐

### Time/Temperature Control for Safety Food (TCS Food)

18A. Proper cooking time & temperatures

☒ ☐ ☐ ☐ ☐ ☐

18B. Whole meat cooking and serving, storing

☐ ☐ ☐ ☒ ☐ ☐

18C. Microwave cooking of raw animal foods

☐ ☐ ☐ ☒ ☐ ☐

19. Proper reheating procedures for hot holding

☐ ☐ ☐ ☒ ☐ ☐

20. Proper cooling time & temperatures

☐ ☐ ☐ ☒ ☐ ☐

21. Proper hot holding temperatures

☒ ☐ ☐ ☐ ☐ ☐

22. Proper cold holding temperatures

☒ ☐ ☐ ☐ ☐ ☐

23. Proper Date Marking

☒ ☐ ☐ ☐ ☐ ☐

23B. TCS Foods Disposition

☒ ☐ ☐ ☐ ☐ ☐

24A. Time as a public health control: procedures

☐ ☐ ☐ ☒ ☐ ☐

24B. Time as a public health control: temperatures & discarding food

☐ ☐ ☐ ☒ ☐ ☐

24C. Time as a public health control: highly susceptible population (HSP)

☐ ☐ ☐ ☒ ☐ ☐

### Consumer Advisory

25. Consumer advisory provided for raw or undercooked foods

IN OUT N/O N/A COS REPEAT  
☐ ☐ ☐ ☒ ☐ ☐

### Highly Susceptible Populations (HSP)

26A. Pasteurized foods used; prohibited foods not offered

IN OUT N/O N/A COS REPEAT  
☐ ☐ ☐ ☒ ☐ ☐

26B. Reservice of foods

☐ ☐ ☐ ☒ ☐ ☐

### Chemical

27. Food additives: approved and properly used

IN OUT N/O N/A COS REPEAT  
☐ ☐ ☐ ☒ ☐ ☐

28A. Toxic substances identified, stored and used

☒ ☐ ☐ ☐ ☐ ☐

28B. Poisonous materials, sanitizers, additives, medicines restriction, separation, storage

☒ ☐ ☐ ☐ ☐ ☐

28C. Conditions of Use: law

☒ ☐ ☐ ☐ ☐ ☐

*Assou*

Inspector

Acknowledged Receipt : Tim Viveiros

Page 3 of 7

## Food Establishment Inspection Report - FDA

### Conformance with Approved Procedures

	IN	OUT	N/O	N/A	COS	REPEAT
29A. Compliance with variance, specialized process, & HACCP plan	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>	
29B. Treating juice- HACCP, reduced oxygen packaging w/out variance, conformance with approved procedures	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>	
29C. When HACCP plan is required	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>	

### GOOD RETAIL PRACTICES

Good Retail Practices are preventative measures to control the addition of pathogens, chemicals, and physical objects into foods.

IN = In compliance OUT = not in compliance COS - corrected on -site during inspection REPEAT = repeat violation

### Safe Food and Water

	IN	OUT	N/O	N/A	COS	REPEAT
30. Pasteurized eggs used where required	<input type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>
31A. Water & ice from approved source	<input type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>
31B. Sampling, alternative water supply	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>	
31C. Sampling report	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>	
32. Variance obtained for specialized processing methods	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>	

### Food Temperature Control

	IN	OUT	N/O	N/A	COS	REPEAT
33A. Proper cooling methods used; adequate equipment for temperature control	<input type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>
33B. Frozen food	<input type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>
34. Plant food properly cooked for hot holding	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>	
35. Approved thawing methods used	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>	
36A. Thermometers provided and accurate	<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>
36B. Thermometers function properly	<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>

### Food Identification

	IN	OUT	COS	REPEAT
37A. Food properly labeled; original container	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
37B. Food labels, labeling of ingredients	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

### Prevention of Food Contamination

	IN	OUT	COS	REPEAT
38A. Insects, rodents, & animals not present	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
38B. Handling prohibition, controlling pests, prohibiting animals	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
39A. Contamination prevented during food storage	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
39B. Food display; ice used as an exterior coolant prohibited as an ingredient	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
39C. Consumer self-service operations- utensils and monitoring	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
40A. Personal cleanliness- prohibition jewelry	<input type="radio"/>	<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

Fail Notes 2-303.11

Prohibition-Jewelry

[The PIC was observed to be wearing a wrist watch. Except for a plain wedding band, while preparing food, food employees may not wear jewelry including medical information jewelry on their arms and hands.]

*Assou*

Inspector

Acknowledged Receipt : Tim Viveiros

Page 4 of 7

## Food Establishment Inspection Report - FDA

### Prevention of Food Contamination

40B. Maintenance of fingernails

IN OUT COS REPEAT  
☒ ☐ ☐ ☐

41. Wiping cloths; properly used and stored

☐ ☒ ☐ ☐

Fail Notes 3-304.14

Wiping Cloths, Use Limitation

[Wiping cloths were being stored on the food preparation table. Cloths in use for wiping counters and other equipment surfaces shall be held between uses in a chemical sanitizer solution at a concentration specified on the manufacturer's label.]

42A. Washing Produce - following chemical manufacturers label

☐ ☐ ☐ ☐

42B. Washing produce

☒ ☐ ☐ ☐

42C. Washing produce- chemicals

☐ ☐ ☐ ☐

### Proper Use of Utensils

43. In-use utensils; properly stored

IN OUT COS REPEAT  
☒ ☐ ☐ ☐

44. Utensils, equipment & linens; properly stored, dried, and handled

☒ ☐ ☐ ☐

45A. Single-use/ single service articles properly stored and used, required

☒ ☐ ☐ ☐

45B. Single-use/service articles use limitation, kitchenware and tableware preventing contamination

☒ ☐ ☐ ☐

46. Gloves used properly

☒ ☐ ☐ ☐

### Utensils, Equipment and Vending

47A. Food & non-food contact surfaces cleanable

IN OUT COS REPEAT  
☒ ☐ ☐ ☐

47B. Food contact surfaces /utensils cleanability, molluscan shellfish tanks, consumer self-service

☒ ☐ ☐ ☐

47C. Properly designed characteristics: food and non-food contact surfaces, molluscan shellfish tanks

☒ ☐ ☐ ☐

48A. Warewashing facilities: installed, maintained, & used; test strips

☐ ☒ ☐ ☐

Fail Notes 4-301.12 (A&B)

Manual warewashing, sink compartment requirements

[Although there is only a 2 compartment sink in the kitchen, food employees must be mindful of how to ensure that the three (3) step cleaning process is carried out. Use one sink for washing cooking utensils in a clean detergent solution and use the same sink (drain wash water first) to rinse cooking utensils with clean water. The second sink should be used to sanitize cooking utensils. Ensure all employees are trained in dishwashing using this 2 sink method. There is an instruction sheet on the wall near the 2 bay compartment sink.]

48B. Operational warewashing machines

☐ ☐ ☐ ☐

49. Non-food contact surfaces clean

☒ ☐ ☐ ☐

### Physical Facilities

50. Hot & cold water available; adequate pressure

IN OUT N/A COS REPEAT  
☒ ☐ ☐ ☐

51A. Plumbing installed; proper backflow devices

☒ ☐ ☐ ☐

51B. Prohibiting a cross-connection, inspection and servicing system

☐ ☐ ☐ ☐

51C. Approved system and cleanable fixtures, service sink

☐ ☐ ☐ ☐ ☐

*Assou*

Inspector

Acknowledged Receipt : Tim Viveiros

Page 5 of 7

## Food Establishment Inspection Report - FDA

### Physical Facilities

	IN	OUT	N/A	COS	REPEAT
52A. Sewage and waste water properly disposed	⊙	○		<input type="checkbox"/>	<input type="checkbox"/>
52B. Grease traps easily accessible for cleaning	○	○		<input type="checkbox"/>	<input type="checkbox"/>
52C. Removing mobile food establishment waste	○	○	⊙	<input type="checkbox"/>	<input type="checkbox"/>
53A. Toilet facilities; properly constructed, supplied, & cleaned	⊙	○		<input type="checkbox"/>	<input type="checkbox"/>
53B. Toilet tissue availability	⊙	○		<input type="checkbox"/>	<input type="checkbox"/>
54. Garbage & refuse properly disposed; facilities maintained	○	⊙		<input type="checkbox"/>	<input type="checkbox"/>
<i>Fail Notes</i>   5-501.13 <i>Receptacles</i> <i>[Provide a small receptacle next to the handwashing sink.]</i>					
55A. Physical facilities installed, maintained, & clean	⊙	○		<input type="checkbox"/>	<input type="checkbox"/>
55B. Private homes and living or sleeping quarters, use prohibition	⊙	○		<input type="checkbox"/>	<input type="checkbox"/>
56. Adequate ventilation & lighting; designated areas used	⊙	○		<input type="checkbox"/>	<input type="checkbox"/>

### MASSACHUSETTS ONLY REGULATIONS

Rules and Regulations adopted for use in Massachusetts only.

### Facilities

	IN	OUT	COS	REPEAT
57A. Catering	○	○	<input type="checkbox"/>	<input type="checkbox"/>
57B. When plans are reviewed, prerequisite for operations- valid permit	○	○	<input type="checkbox"/>	<input type="checkbox"/>
57C. Contents of plans and specifications, preoperational inspections	○	○	<input type="checkbox"/>	<input type="checkbox"/>
58. Mobile Food Operations	○	○	<input type="checkbox"/>	<input type="checkbox"/>
59. Temporary Food Establishments	○	○	<input type="checkbox"/>	<input type="checkbox"/>
60. Residential Kitchens	○	○	<input type="checkbox"/>	<input type="checkbox"/>

### Procedures

	IN	OUT	COS	REPEAT
61. Anti-choking Procedures	○	○	<input type="checkbox"/>	<input type="checkbox"/>
62. Tobacco Products: Notice and Sale	○	○	<input type="checkbox"/>	<input type="checkbox"/>
63. Food Allergy Awareness Requirements	○	○	<input type="checkbox"/>	<input type="checkbox"/>

*Assou*

Inspector

Acknowledged Receipt : Tim Viveiros

Page 6 of 7

## Food Establishment Inspection Report - FDA

### Footnote 1

#### Notes:

New PIC since October 2018



Inspector

Acknowledged Receipt : Tim Viveiros

Page 7 of 7



**City of Newton**  
**Health and Human Services**  
 Deborah Youngblood, PhD, Commissioner  
 1000 Commonwealth Ave Newton, MA 02459  
 (617) 796-1420



**Public Health**  
 Prevent. Promote. Protect.

**Food Establishment Inspection Report - FDA**

**Insp Date:** 11/28/2017    **Business ID:** 1N2083  
**Business:** Brown Middle School  
 125 Meadowbrook Rd.

Newton, MA 02459

**Inspection:** 6N000005  
**Section:** 2  
**Phone:** 552-7409  
**Inspector:** 1N11123 Nicola Assan  
**Reason:** 1-Routine  
**Results:** No Follow-up R2

**Inspection Summary**

Official Order for Correction: Based on an inspection today, the items checked indicate violations of 105 CMR 590.000/ 2013 Federal Food Code. This report, when signed below by the Commissioner of Health / Agent constitutes an order by the Commissioner of Health. Failure to correct violations cited in this report may result in suspension or revocation of the food establishment permit and cessation of food establishment operations. If aggrieved by this order, you have the right to a hearing. The request must be in writing and submitted to the Commissioner of Health at the above address within 10 days of receipt of this order.

Est. Type 1 - Food Svc Establish License/Permit # \_\_\_\_\_ Risk Category 02 Risk Level Observed 02 Low

Foodborne Illness Complaint Investigated (All) ☐ Involving More Than Two Persons ☐

**FOODBORNE ILLNESS RISK FACTORS AND PUBLIC HEALTH INTERVENTIONS**

Compliance status: IN = in compliance OUT = not in compliance N/O = not observed N/A = not applicable

Marked in appropriate box for COS and/or R. COS = corrected on-site during inspection R = repeat violation

Risk factors are improper practices or procedures identified as the most prevalent contributing factors of foodborne illness or injury. Public Health Interventions are control measures to prevent foodborne illnesses or injury.

**Supervision**

1. PIC Present, Knowledge and Duties

IN	OUT	N/O	N/A	COS	REPEAT
<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>

2. Certified Food Protection Manager

<input checked="" type="radio"/>	<input type="radio"/>		<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
----------------------------------	-----------------------	--	-----------------------	--------------------------	--------------------------

**Employee Health / Responding to Contamination Events**

3A. Employee Health: PIC Knowledge, Responsibilities & Reporting

<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>
----------------------------------	-----------------------	--	--	--------------------------	--------------------------

3B. Employee Reporting to PIC

<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>
----------------------------------	-----------------------	--	--	--------------------------	--------------------------

4. Proper Use of Restriction & Exclusion

<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>
----------------------------------	-----------------------	--	--	--------------------------	--------------------------

5. Clean-up of Vomiting and Diarrheal Events

<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>
----------------------------------	-----------------------	--	--	--------------------------	--------------------------

**Good Hygienic Practices**

6A. Proper eating, tasting, drinking, or tobacco use

<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>
----------------------------------	-----------------------	-----------------------	--	--------------------------	--------------------------

6B. Preventing contamination when tasting

<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>
----------------------------------	-----------------------	-----------------------	--	--------------------------	--------------------------

Inspector \_\_\_\_\_

Acknowledged Receipt : \_\_\_\_\_

Page 1 of 7

## Food Establishment Inspection Report - FDA

### Good Hygienic Practices

7. No discharge from eyes, nose, and mouth

IN	OUT	N/O	N/A	COS	REPEAT
<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>

### Control of Hands as a Vehicle of Contamination

8A. Hands clean & properly washed

IN	OUT	N/O	N/A	COS	REPEAT
<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>

8B. Where to wash, hand antiseptics

IN	OUT	N/O	N/A	COS	REPEAT
<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>

9. No bare hand contact with RTE food or a pre-approved alternative procedure properly allowed

IN	OUT	N/O	N/A	COS	REPEAT
<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

10A. Adequate handwashing sinks properly supplied and accessible

IN	OUT	N/O	N/A	COS	REPEAT
<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>

10B. Handwashing sinks accesible with proper signage, handwashing aids

IN	OUT	N/O	N/A	COS	REPEAT
<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>

### Approved Sources

11A. Milk, eggs, juice, bottled water, hermetically sealed food, game animals

IN	OUT	N/O	N/A	COS	REPEAT
<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

11B. Packaged foods, labeling, whole muscle beef

IN	OUT	N/O	N/A	COS	REPEAT
<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

11C. Obtaining raw fish, packaged meat & poultry, eggs

IN	OUT	N/O	N/A	COS	REPEAT
<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

12A. Food received at proper temperature

IN	OUT	N/O	N/A	COS	REPEAT
<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

12B. Shipping and receiving frozen food

IN	OUT	N/O	N/A	COS	REPEAT
<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

13. Food in good condition, honestly presented, safe, & unadulterated

IN	OUT	N/O	N/A	COS	REPEAT
<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>

13B. Food package integrity

IN	OUT	N/O	N/A	COS	REPEAT
<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>

14A. Required records available: shellstock tags, parasite destruction

IN	OUT	N/O	N/A	COS	REPEAT
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

14B. Missing shellstock tags, destruction

IN	OUT	N/O	N/A	COS	REPEAT
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

14C. Parasite destruction- storing raw/partially cooked fish

IN	OUT	N/O	N/A	COS	REPEAT
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

### Protection from Contamination

15A. Food separated & protected

IN	OUT	N/O	N/A	COS	REPEAT
<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

15B. Cleaning equip/utensils/food containers

IN	OUT	N/O	N/A	COS	REPEAT
<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

16A. Food-contact surfaces: cleaned & sanitized immersion 171° F and above

IN	OUT	N/O	N/A	COS	REPEAT
<input checked="" type="radio"/>	<input type="radio"/>		<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

16B. Food contact surfaces cleaned and sanitized NMT 194° F, NLT 180° F

IN	OUT	N/O	N/A	COS	REPEAT
<input type="radio"/>	<input type="radio"/>		<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

16C. Mechanical warewashing equipment sanitization food contact surfaces, equip., utensils

IN	OUT	N/O	N/A	COS	REPEAT
<input type="radio"/>	<input type="radio"/>		<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

17. Proper disposition of returned, previously served reconditions, & unsafe food

IN	OUT	N/O	N/A	COS	REPEAT
<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>

### Time/Temperature Control for Safety Food (TCS Food)

18A. Proper cooking time & temperatures

IN	OUT	N/O	N/A	COS	REPEAT
<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

18B. Whole meat cooking and serving, storing

IN	OUT	N/O	N/A	COS	REPEAT
<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

18C. Microwave cooking of raw animal foods

IN	OUT	N/O	N/A	COS	REPEAT
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

19. Proper reheating procedures for hot holding

IN	OUT	N/O	N/A	COS	REPEAT
<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

20. Proper cooling time & temperatures

IN	OUT	N/O	N/A	COS	REPEAT
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

21. Proper hot holding temperatures

IN	OUT	N/O	N/A	COS	REPEAT
<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

Inspector \_\_\_\_\_

Acknowledged Receipt : \_\_\_\_\_

Page 2 of 7

## Food Establishment Inspection Report - FDA

Time/Temperature Control for Safety Food (TCS Food)	IN	OUT	N/O	N/A	COS	REPEAT
---	----	-----	-----	-----	-----	--------

22. Proper cold holding temperatures

☐ IN    ☒ OUT    ☐ N/O    ☐ N/A    ☐ COS    ☐ REPEAT

**This item has Notes. See Footnote 1 at end of questionnaire.**

Fail Notes	3-501.16(A2 &B)	<p><i>*Cold PHFs Maintained at or Below 41oF- also pertains to untreated eggs (45F)</i></p> <p><i>[The food (cheese, tuna mayonnaise, coleslaw, boiled eggs and salad) in the chilled serving cabinet had recorded temperatures ranging from 45.1 to 50.4 degrees fahrenheit. These foods should be held at the proper cold holding temperature of 41 degrees fahrenheit or below to prevent the growth of pathogens. ]</i></p>
------------	-----------------	---

23. Proper Date Marking

☒ IN    ☐ OUT    ☐ N/O    ☐ N/A    ☐ COS    ☐ REPEAT

23B. TCS Foods Disposition

☐ IN    ☐ OUT    ☐ N/O    ☒ N/A    ☐ COS    ☐ REPEAT

24A. Time as a public health control: procedures

☐ IN    ☐ OUT    ☐ N/O    ☒ N/A    ☐ COS    ☐ REPEAT

24B. Time as a public health control: temperatures & discarding food

☐ IN    ☐ OUT    ☐ N/O    ☒ N/A    ☐ COS    ☐ REPEAT

24C. Time as a public health control: highly susceptible population (HSP)

☐ IN    ☐ OUT    ☐ N/O    ☒ N/A    ☐ COS    ☐ REPEAT

### Consumer Advisory

25. Consumer advisory provided for raw or undercooked foods

☐ IN    ☐ OUT    ☐ N/O    ☒ N/A    ☐ COS    ☐ REPEAT

### Highly Susceptible Populations (HSP)

26A. Pasteurized foods used; prohibited foods not offered

☐ IN    ☐ OUT    ☐ N/O    ☒ N/A    ☐ COS    ☐ REPEAT

26B. Reservice of foods

☐ IN    ☐ OUT    ☐ N/O    ☒ N/A    ☐ COS    ☐ REPEAT

### Chemical

27. Food additives: approved and properly used

☐ IN    ☐ OUT    ☐ N/O    ☒ N/A    ☐ COS    ☐ REPEAT

28A. Toxic substances identified, stored and used

☒ IN    ☐ OUT    ☐ N/O    ☐ N/A    ☐ COS    ☐ REPEAT

28B. Poisonous materials, sanitizers, additives, medicines restriction, separation, storage

☒ IN    ☐ OUT    ☐ N/O    ☐ N/A    ☐ COS    ☐ REPEAT

28C. Conditions of Use: law

☒ IN    ☐ OUT    ☐ N/O    ☐ N/A    ☐ COS    ☐ REPEAT

### Conformance with Approved Procedures

29A. Compliance with variance, specialized process, & HACCP plan

☐ IN    ☐ OUT    ☐ N/O    ☒ N/A    ☐ COS    ☐ REPEAT

29B. Treating juice- HACCP, reduced oxygen packaging w/out variance, conformance with approved procedures

☐ IN    ☐ OUT    ☐ N/O    ☒ N/A    ☐ COS    ☐ REPEAT

29C. When HACCP plan is required

☐ IN    ☐ OUT    ☐ N/O    ☒ N/A    ☐ COS    ☐ REPEAT

### GOOD RETAIL PRACTICES

Good Retail Practices are preventative measures to control the addition of pathogens, chemicals, and physical objects into foods.

IN = In compliance    OUT = not in compliance    COS - corrected on -site during inspection    REPEAT = repeat violation

### Safe Food and Water

30. Pasteurized eggs used where required

☒ IN    ☐ OUT    ☐ N/O    ☐ N/A    ☐ COS    ☐ REPEAT

Inspector \_\_\_\_\_

Acknowledged Receipt : \_\_\_\_\_

Page 3 of 7

## Food Establishment Inspection Report - FDA

Safe Food and Water	IN	OUT	N/O	N/A	COS	REPEAT
31A. Water & ice from approved source	<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>
31B. Sampling, alternative water supply	<input type="radio"/>	<input type="radio"/>		<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
31C. Sampling report	<input type="radio"/>	<input type="radio"/>		<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
32. Variance obtained for specialized processing methods	<input type="radio"/>	<input type="radio"/>		<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
Food Temperature Control	IN	OUT	N/O	N/A	COS	REPEAT
33A. Proper cooling methods used; adequate equipment for temperature control	<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>
33B. Frozen food	<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>
34. Plant food properly cooked for hot holding	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
35. Approved thawing methods used	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
36A. Thermometers provided and accurate	<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>
36B. Thermometers function properly	<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>
Food Identification	IN	OUT	COS	REPEAT		
37A. Food properly labeled; original container	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>		
37B. Food labels, labeling of ingredients	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>		
Prevention of Food Contamination	IN	OUT	COS	REPEAT		
38A. Insects, rodents, & animals not present	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>		
38B. Handling prohibition, controlling pests, prohibiting animals	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>		
39A. Contamination prevented during food storage	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>		
39B. Food display; ice used as an exterior coolant prohibited as an ingredient	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>		
39C. Consumer self-service operations- utensils and monitoring	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>		
40A. Personal cleanliness- prohibition jewelry	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>		
40B. Maintenance of fingernails	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>		
41. Wiping cloths; properly used and stored	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>		
42A. Washing Produce - following chemical manufacturers label	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>		
42B. Washing produce	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>		
42C. Washing produce- chemicals	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>		
Proper Use of Utensils	IN	OUT	COS	REPEAT		
43. In-use utensils; properly stored	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>		
44. Utensils, equipment & linens; properly stored, dried, and handled	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>		
45A. Single-use/ single service articles properly stored and used, required	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>		
45B. Single-use/service articles use limitation, kitchenware and tableware preventing contamination	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>		
46. Gloves used properly	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>		

Inspector \_\_\_\_\_

Acknowledged Receipt : \_\_\_\_\_

Page 4 of 7

## Food Establishment Inspection Report - FDA

### Utensils, Equipment and Vending

	IN	OUT	COS	REPEAT
47A. Food & non-food contact surfaces cleanable	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
47B. Food contact surfaces /utensils cleanability, molluscan shellfish tanks, consumer self-service	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
47C. Properly designed characteristics: food and non-food contact surfaces, molluscan shellfish tanks	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
48A. Warewashing facilities: installed, maintained, & used; test strips	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
48B. Operational warewashing machines	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
49. Non-food contact surfaces clean	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

### Physical Facilities

	IN	OUT	N/A	COS	REPEAT
50. Hot & cold water available; adequate pressure	<input checked="" type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>
51A. Plumbing installed; proper backflow devices	<input checked="" type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>
51B. Prohibiting a cross-connection, inspection and servicing system	<input checked="" type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>
51C. Approved system and cleanable fixtures, service sink	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
52A. Sewage and waste water properly disposed	<input checked="" type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>
52B. Grease traps easily accessible for cleaning	<input checked="" type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>
52C. Removing mobile food establishment waste	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
53A. Toilet facilities; properly constructed, supplied, & cleaned	<input checked="" type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>
53B. Toilet tissue availability	<input checked="" type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>
54. Garbage & refuse properly disposed; facilities maintained	<input checked="" type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>
55A. Physical facilities installed, maintained, & clean	<input checked="" type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>
55B. Private homes and living or sleeping quarters, use prohibition	<input checked="" type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>
56. Adequate ventilation & lighting; designated areas used	<input checked="" type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>

### MASSACHUSETTS ONLY REGULATIONS

Rules and Regulations adopted for use in Massachusetts only.

#### Facilities

	IN	OUT	COS	REPEAT
57A. Catering	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
57B. When plans are reviewed, prerequisite for operations- valid permit	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
57C. Contents of plans and specifications, preoperational inspections	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
58. Mobile Food Operations	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
59. Temporary Food Establishments	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
60. Residential Kitchens	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

#### Procedures

	IN	OUT	COS	REPEAT
61. Anti-choking Procedures	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
62. Tobacco Products: Notice and Sale	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

Inspector \_\_\_\_\_

Acknowledged Receipt : \_\_\_\_\_

Page 5 of 7

## Food Establishment Inspection Report - FDA

Procedures

IN OUT COS REPEAT

63. Food Allergy Awareness Requirements

☒ ☐ ☐ ☐

***This item has Notes. See Footnote 2 at end of questionnaire.***

Inspector

Acknowledged Receipt :

Page 6 of 7

## Food Establishment Inspection Report - FDA

### **Footnote 1**

**Notes:**

The food service staff placed these foods into the refrigerator until the next service.

In future they will prepare these foods an hour or so before service and place in the refrigerator rather than prepare immediately before service and place directly into the cold holding display cabinet. This will allow the food to maintain a temperature of 41 degrees fahrenheit or below.

### **Footnote 2**

**Notes:**

Operations manager, Kristin Smith, informed me that all staff receive annual training with respect to allergy awareness.

\_\_\_\_\_  
Inspector

\_\_\_\_\_  
Acknowledged Receipt :

Page 7 of 7



**City of Newton**  
**Health and Human Services**  
 Deborah Youngblood, PhD, Commissioner  
 1000 Commonwealth Ave Newton, MA 02459  
 (617) 796-1420



**Public Health**  
 Prevent. Promote. Protect.

**Food Establishment Inspection Report - FDA**

**Insp Date:** 6/5/2018      **Business ID:** 1N2083  
**Business:** Brown Middle School  
 125 Meadowbrook Rd.

Newton, MA 02459

**Inspection:** CN000440  
**Section:** 2  
**Phone:** 552-7409  
**Inspector:** 1N1121 Derek Kwok  
**Reason:** 1-Routine  
**Results:** No Follow-up R2

**Inspection Summary**

Official Order for Correction: Based on an inspection today, the items checked indicate violations of 105 CMR 590.000/ 2013 Federal Food Code. This report, when signed below by the Commissioner of Health / Agent constitutes an order by the Commissioner of Health. Failure to correct violations cited in this report may result in suspension or revocation of the food establishment permit and cessation of food establishment operations. If aggrieved by this order, you have the right to a hearing. The request must be in writing and submitted to the Commissioner of Health at the above address within 10 days of receipt of this order.

Est. Type 1 - Food Svc Establish License/Permit # \_\_\_\_\_ Risk Category 02 Risk Level Observed 02 Low

Foodborne Illness Complaint Investigated (All) ☐ Involving More Than Two Persons ☐

**FOODBORNE ILLNESS RISK FACTORS AND PUBLIC HEALTH INTERVENTIONS**

Compliance status: IN = in compliance OUT = not in compliance N/O = not observed N/A = not applicable

Marked in appropriate box for COS and/or R. COS = corrected on-site during inspection R = repeat violation

Risk factors are improper practices or procedures identified as the most prevalent contributing factors of foodborne illness or injury. Public Health Interventions are control measures to prevent foodborne illnesses or injury.

**Supervision**

- 1. PIC Present, Knowledge and Duties
- 2. Certified Food Protection Manager

IN	OUT	N/O	N/A	COS	REPEAT
<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>
<input checked="" type="radio"/>	<input type="radio"/>		<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

**Employee Health / Responding to Contamination Events**

- 3A. Employee Health: PIC Knowledge, Responsibilities & Reporting
- 3B. Employee Reporting to PIC
- 4. Proper Use of Restriction & Exclusion
- 5. Clean-up of Vomiting and Diarrheal Events

IN	OUT	N/O	N/A	COS	REPEAT
<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>
<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>
<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>
<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>

**Good Hygienic Practices**

- 6A. Proper eating, tasting, drinking, or tobacco use
- 6B. Preventing contamination when tasting

IN	OUT	N/O	N/A	COS	REPEAT
<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>
<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>

*Derek Kwok*

Inspector

Acknowledged Receipt : Newton Public School

Page 1 of 7

## Food Establishment Inspection Report - FDA

Good Hygienic Practices	IN	OUT	N/O	N/A	COS	REPEAT
7. No discharge from eyes, nose, and mouth	⊙	○	○		□	□

Control of Hands as a Vehicle of Contamination	IN	OUT	N/O	N/A	COS	REPEAT
8A. Hands clean & properly washed	⊙	○	○		□	□
8B. Where to wash, hand antiseptics	⊙	○	○		□	□
9. No bare hand contact with RTE food or a pre-approved alternative procedure properly allowed	⊙	○	○	○	□	□
10A. Adequate handwashing sinks properly supplied and accessible	⊙	○			□	□
10B. Handwashing sinks accesible with proper signage, handwashing aids	⊙	○			□	□

Approved Sources	IN	OUT	N/O	N/A	COS	REPEAT
11A. Milk, eggs, juice, bottled water, hermetically sealed food, game animals	⊙	○	○	○	□	□
11B. Packaged foods, labeling, whole muscle beef	⊙	○	○	○	□	□
11C. Obtaining raw fish, packaged meat & poultry, eggs	⊙	○	○	○	□	□
12A. Food received at proper temperature	○	○	⊙	○	□	□
12B. Shipping and receiving frozen food	○	○	⊙	○	□	□
13. Food in good condition, honestly presented, safe, & unadulterated	⊙	○			□	□
13B. Food package integrity	⊙	○			□	□
14A. Required records available: shellstock tags, parasite destruction	○	○	○	⊙	□	□
14B. Missing shellstock tags, destruction	○	○	○	⊙	□	□
14C. Parasite destruction- storing raw/partially cooked fish	○	○	○	⊙	□	□

Protection from Contamination	IN	OUT	N/O	N/A	COS	REPEAT
15A. Food separated & protected	⊙	○	○	○	□	□
15B. Cleaning equip/utensils/food containers	⊙	○	○	○	□	□
16A. Food-contact surfaces: cleaned & sanitized immersion 171° F and above	○	⊙		○	□	□

Fail Notes	4-702.11	<p><i>*Frequency of Sanitization of Utensils and Food-Contact Surfaces of Equipment</i></p> <p><i>[Currently the establishment is using a sanitizing solution as a "Cleaner" for equipment that is not being washed at the 3-bay sink. Sanitizer is NOT a cleaner. The instructions on the sanitizer manufacturer label states to clean first with a detergent, rinse THEN sanitize. Cleaning is always a three (3) step process: Wash, Rinse then Sanitize. Follow the instructions on the chemical manufacturer's label. A container with soapy water shall be available for proper cleaning. The use of Green Buckets is HIGHLY recommended. Sanitizer also does not remove allergens. To remove allergens use a soapy water solution. If a surface needs to be cleaned from crumbs or ingredients (not allergens or raw meats) use a disposable paper towel. Use once and dispose. Review and train the staff on proper cleaning procedures. See violations #48 4-603.14 and 4-603.16 for additional cleaning comments.]</i></p>
------------	----------	--

*D. K. P.*

Inspector

Acknowledged Receipt : Newton Public School

Page 2 of 7

# Food Establishment Inspection Report - FDA

## Protection from Contamination

IN OUT N/O N/A COS REPEAT

**Fail Notes** 4-703.11 *\*Methods of Sanitization - Hot Water and Chemical  
[An employee stated that they are using a 15 second contact time for equipment being sanitized at the 3-bay sink. The directions of use on the chemical manufacturer label requires a 60 second contact time. Follow the directions of use on the chemical manufacturer label and use a 60 second contact time.]*

- 16B. Food contact surfaces cleaned and sanitized NMT 194° F, NLT 180° F ☒ ☐ ☐ ☐ ☐
- 16C. Mechanical warewashing equipment sanitization food contact surfaces, equip., utensils ☒ ☐ ☐ ☐ ☐
17. Proper disposition of returned, previously served reconditions, & unsafe food ☒ ☐ ☐ ☐

## Time/Temperature Control for Safety Food (TCS Food)

IN OUT N/O N/A COS REPEAT

- 18A. Proper cooking time & temperatures ☒ ☐ ☐ ☐ ☐ ☐
- 18B. Whole meat cooking and serving, storing ☐ ☐ ☐ ☒ ☐ ☐
- 18C. Microwave cooking of raw animal foods ☐ ☐ ☐ ☒ ☐ ☐
19. Proper reheating procedures for hot holding ☐ ☐ ☒ ☐ ☐ ☐
20. Proper cooling time & temperatures ☒ ☐ ☐ ☐ ☐ ☐
21. Proper hot holding temperatures ☐ ☒ ☐ ☐ ☐ ☐

**Fail Notes** 3-501.16 (A) *\*Hot TCS foods Maintained at or Above 135oF, Also for whole meat roasts (130F and above)  
[Chili in one of the right side hot holding units was observed at 118-120°F towards the top of the chili in the container. The temp towards the bottom of the chili container was observed over 135°F. Occasionally stir food products in hot holding units to distribute heat. Except during preparation, cooking, or cooling, or when time is used as the public health control, TCS (Time / Temperature Control for Safety Food) Food shall be maintained at 135°F or above.]*

22. Proper cold holding temperatures ☐ ☒ ☐ ☐ ☐ ☐

**Fail Notes** 3-501.16(A2 &B) *\*Cold PHFs Maintained at or Below 41oF- also pertains to untreated eggs (45F)  
[The following TCS (Time / Temperature Control for Safety Food) foods had the following internal temperatures: middle cold holding station (cold plate): cut tomatoes 48.7°F and cut lettuce 49.4°F. Employees stated that both food items were cut and placed in this station prior to service.*

*Maintain the internal temperature of TCS Foods at 41°F or below.]*

23. Proper Date Marking ☒ ☐ ☐ ☐ ☐ ☐
- 23B. TCS Foods Disposition ☒ ☐ ☐ ☐ ☐ ☐
- 24A. Time as a public health control: procedures ☐ ☐ ☐ ☒ ☐ ☐
- 24B. Time as a public health control: temperatures & discarding food ☐ ☐ ☐ ☒ ☐ ☐
- 24C. Time as a public health control: highly susceptible population (HSP) ☐ ☐ ☐ ☒ ☐ ☐

*D. K. H.*

Inspector

Acknowledged Receipt : Newton Public School

Page 3 of 7

## Food Establishment Inspection Report - FDA

### Consumer Advisory

25. Consumer advisory provided for raw or undercooked foods

IN OUT N/O N/A COS REPEAT  
☐ ☐ ☐ ☐ ☐

### Highly Susceptible Populations (HSP)

26A. Pasteurized foods used; prohibited foods not offered

IN OUT N/O N/A COS REPEAT  
☐ ☐ ☐ ☐ ☐

26B. Reservice of foods

☐ ☐ ☐ ☐ ☐

### Chemical

27. Food additives: approved and properly used

IN OUT N/O N/A COS REPEAT  
☐ ☐ ☐ ☐ ☐

28A. Toxic substances identified, stored and used

☒ ☐ ☐ ☐ ☐

28B. Poisonous materials, sanitizers, additives, medicines restriction, separation, storage

☐ ☒ ☐ ☐ ☐

Fail Notes 7-202.12 (A 2,3, B)

*\*Conditions of Use: labeling, applied to eliminate hazards*

*[A container of Handy Clean Hand Sanitizing Wipes were observed being stored next to a thermometer and alcohol swabs. When asked about the hand wipes, an employee stated that they are using them to clean the thermometer probe when alcohol swabs run out. This product does not appear to be approved for food contact surfaces. Employee moved the wipes away from the thermometer. Do not use this product to clean food contact surfaces. Poisonous or toxic materials shall be used according to the manufacturer's use directions included in labeling, and, for a pesticide, manufacturer's label instructions that state that use is allowed in a food establishment. Failure to properly use poisonous or toxic materials can be dangerous. Many poisonous or toxic materials have general use directions on their label. Failure to follow the stated instructions could result in injury to employees and consumers through direct contact or the contamination of food. Always read the chemical manufacture label for use instructions. The label must state "for sanitizing food contact surfaces" etc. ]*

28C. Conditions of Use: law

☒ ☐ ☐ ☐ ☐

### Conformance with Approved Procedures

29A. Compliance with variance, specialized process, & HACCP plan

IN OUT N/O N/A COS REPEAT  
☐ ☐ ☐ ☐ ☐

29B. Treating juice- HACCP, reduced oxygen packaging w/out variance, conformance with approved procedures

☐ ☐ ☐ ☐ ☐

29C. When HACCP plan is required

☐ ☐ ☐ ☐ ☐

### GOOD RETAIL PRACTICES

Good Retail Practices are preventative measures to control the addition of pathogens, chemicals, and physical objects into foods.

IN = In compliance OUT = not in compliance COS - corrected on -site during inspection REPEAT = repeat violation

*D. K. P.*

Inspector

Acknowledged Receipt : Newton Public School

Page 4 of 7

## Food Establishment Inspection Report - FDA

### Safe Food and Water

	IN	OUT	N/O	N/A	COS	REPEAT
30. Pasteurized eggs used where required	<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>
31A. Water & ice from approved source	<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>
31B. Sampling, alternative water supply	<input type="radio"/>	<input checked="" type="radio"/>		<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

*Fail Notes*    5-104.12    *Alternative water supply- water available for mobile, temp. food establishment  
[The water supply for the 3-bay sink is currently shut off. Employees are filling the 3-bay with an outside hose. This is not an approved water source. Employees will now use commercially bottled water to fill the 3-bay until the issue with 3-bay water supply is resolved. ]*

31C. Sampling report	<input checked="" type="radio"/>	<input type="radio"/>		<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
32. Variance obtained for specialized processing methods	<input checked="" type="radio"/>	<input type="radio"/>		<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

### Food Temperature Control

	IN	OUT	N/O	N/A	COS	REPEAT
33A. Proper cooling methods used; adequate equipment for temperature control	<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>
33B. Frozen food	<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>
34. Plant food properly cooked for hot holding	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
35. Approved thawing methods used	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
36A. Thermometers provided and accurate	<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>
36B. Thermometers function properly	<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>

### Food Identification

	IN	OUT	COS	REPEAT
37A. Food properly labeled; original container		<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
37B. Food labels, labeling of ingredients		<input type="radio"/>	<input checked="" type="radio"/>	<input type="checkbox"/>

*Fail Notes*    3-602.11 (B5)    *\*Labeling of major food allergen  
[Parfait cups in the self serve refrigeration units were observed without labeled ingredients. Apple fritters (according to employees) in the self serve refrigeration units were observed without any labels (common name and ingredients). Food packaged in a food establishment shall be labeled to include the following information:  
The common name of the food, if made from more than two ingredients, a list of ingredients and sub-ingredients in descending order of predominance by weight, including a declaration of artificial colors, artificial flavors and chemical preservatives, the net quantity of contents, the name and place of business of the manufacturer, packer, or distributor, and the major food allergen.]*

### Prevention of Food Contamination

	IN	OUT	COS	REPEAT
38A. Insects, rodents, & animals not present	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
38B. Handling prohibition, controlling pests, prohibiting animals	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
39A. Contamination prevented during food storage	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
39B. Food display; ice used as an exterior coolant prohibited as an ingredient	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
39C. Consumer self-service operations- utensils and monitoring	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
40A. Personal cleanliness- prohibition jewelry	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

*David K. P.*

Inspector

Acknowledged Receipt : Newton Public School

Page 5 of 7

## Food Establishment Inspection Report - FDA

### Prevention of Food Contamination

	IN	OUT	COS	REPEAT
40B. Maintenance of fingernails	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
41. Wiping cloths; properly used and stored	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
42A. Washing Produce - following chemical manufacturers label	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
42B. Washing produce	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
42C. Washing produce- chemicals	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

### Proper Use of Utensils

	IN	OUT	COS	REPEAT
43. In-use utensils; properly stored	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
44. Utensils, equipment & linens; properly stored, dried, and handled	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
45A. Single-use/ single service articles properly stored and used, required	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
45B. Single-use/service articles use limitation, kitchenware and tableware preventing contamination	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
46. Gloves used properly	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

### Utensils, Equipment and Vending

	IN	OUT	COS	REPEAT
47A. Food & non-food contact surfaces cleanable	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
47B. Food contact surfaces /utensils cleanability, molluscan shellfish tanks, consumer self-service	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
47C. Properly designed characteristics: food and non-food contact surfaces, molluscan shellfish tanks	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
48A. Warewashing facilities: installed, maintained, & used; test strips	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
48B. Operational warewashing machines	<input type="radio"/>	<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

#### Fail Notes

- 4-603.14 *Wet cleaning*  
*[Currently the establishment is using a sanitizing solution as a "Cleaner" for equipment that is not being washed at the 3-bay sink. Sanitizer is not a cleaner. Equipment shall be effectively washed to remove or completely loosen soils by using a detergent containing wetting agents and emulsifiers. Cleaning is a three (3) step process: Wash, Rinse then Sanitize. Green buckets with a soapy water solution should be set-up for cleaning. If surfaces require cleaning to remove crumbs, use a paper towel. Use once then dispose. See violation #16 4-702.11 and #48 4-603.16 for additional cleaning comments.]*
- 4-603.16 *Rinsing Procedures*  
*[Currently the establishment is using a sanitizing solution as a "Cleaner" for equipment that is not being washed at the 3-bay sink. Sanitizer is not a cleaner. Equipment shall be effectively washed to remove or completely loosen soils by using a detergent containing wetting agents and emulsifiers. Washed utensils and equipment shall be rinsed so that abrasives are removed and cleaning chemicals are removed or diluted through the use of water. Cleaning is a three (3) step process: Wash, Rinse then Sanitize. It is important to rinse off detergents, abrasive, and food debris after the wash step to avoid diluting or inactivating the sanitizer. See violation #16 4-702.11 and #48 4-603.14 for additional cleaning comments.]*

49. Non-food contact surfaces clean	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
-------------------------------------	----------------------------------	-----------------------	--------------------------	--------------------------

*David K. H.*

Inspector

Acknowledged Receipt : Newton Public School

Page 6 of 7

## Food Establishment Inspection Report - FDA

### Physical Facilities

	IN	OUT	N/A	COS	REPEAT
50. Hot & cold water available; adequate pressure	<input checked="" type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>
51A. Plumbing installed; proper backflow devices	<input checked="" type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>
51B. Prohibiting a cross-connection, inspection and servicing system	<input checked="" type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>
51C. Approved system and cleanable fixtures, service sink	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
52A. Sewage and waste water properly disposed	<input checked="" type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>
52B. Grease traps easily accessible for cleaning	<input checked="" type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>
52C. Removing mobile food establishment waste	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
53A. Toilet facilities; properly constructed, supplied, & cleaned	<input checked="" type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>
53B. Toilet tissue availability	<input checked="" type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>
54. Garbage & refuse properly disposed; facilities maintained	<input checked="" type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>
55A. Physical facilities installed, maintained, & clean	<input checked="" type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>
55B. Private homes and living or sleeping quarters, use prohibition	<input checked="" type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>
56. Adequate ventilation & lighting; designated areas used	<input checked="" type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>

### MASSACHUSETTS ONLY REGULATIONS

Rules and Regulations adopted for use in Massachusetts only.

#### Facilities

	IN	OUT	COS	REPEAT
57A. Catering	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
57B. When plans are reviewed, prerequisite for operations- valid permit	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
57C. Contents of plans and specifications, preoperational inspections	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
58. Mobile Food Operations	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
59. Temporary Food Establishments	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
60. Residential Kitchens	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

#### Procedures

	IN	OUT	COS	REPEAT
61. Anti-choking Procedures	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
62. Tobacco Products: Notice and Sale	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
63. Food Allergy Awareness Requirements	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

*David K. H.*

Inspector

Acknowledged Receipt : Newton Public School

Page 7 of 7



City of Newton  
Health and Human Services  
Deborah Youngblood, PhD, Commissioner  
1000 Commonwealth Ave Newton, MA 02459  
(617) 796-1420



Public Health  
Prevent, Promote, Protect

Food Establishment Inspection Report - FDA

Insp Date: 10/9/2018 Business ID: 1N2083  
Business: Brown Middle School  
125 Meadowbrook Rd.  
Newton, MA 02459

Inspection: 6N000051  
Section: 2  
Phone: 552-7409  
Inspector: 1N11123 Nicola Assan  
Reason: 1-Routine  
Results: No Follow-up R2

Inspection Summary

Official Order for Correction: Based on an inspection today, the items checked indicate violations of 105 CMR 590.000/ 2013 Federal Food Code. This report, when signed below by the Commissioner of Health / Agent constitutes an order by the Commissioner of Health. Failure to correct violations cited in this report may result in suspension or revocation of the food establishment permit and cessation of food establishment operations. If aggrieved by this order, you have the right to a hearing. The request must be in writing and submitted to the Commissioner of Health at the above address within 10 days of receipt of this order.

Est. Type 1 - Food Svc Establish License/Permit # \_\_\_\_\_ Risk Category 02 Risk Level Observed 02 Low

Foodborne Illness Complaint Investigated (All) ☐ Involving More Than Two Persons ☐

FOODBORNE ILLNESS RISK FACTORS AND PUBLIC HEALTH INTERVENTIONS

Compliance status: IN = in compliance OUT = not in compliance N/O = not observed N/A = not applicable

Marked in appropriate box for COS and/or R. COS = corrected on-site during inspection R = repeat violation

Risk factors are improper practices or procedures identified as the most prevalent contributing factors of foodborne illness or injury. Public Health Interventions are control measures to prevent foodborne illnesses or injury.

Supervision

- 1. PIC Present, Knowledge and Duties
- 2. Certified Food Protection Manager

IN	OUT	N/O	N/A	COS	REPEAT
⊙	○			□	□
⊙	○		○	□	□

Employee Health / Responding to Contamination Events

- 3A. Employee Health: PIC Knowledge, Responsibilities & Reporting
- 3B. Employee Reporting to PIC
- 4. Proper Use of Restriction & Exclusion
- 5. Clean-up of Vomiting and Diarrheal Events

IN	OUT	N/O	N/A	COS	REPEAT
⊙	○			□	□
⊙	○			□	□
⊙	○			□	□
⊙	○			□	□

Good Hygienic Practices

- 6A. Proper eating, tasting, drinking, or tobacco use
- 6B. Preventing contamination when tasting

IN	OUT	N/O	N/A	COS	REPEAT
⊙	○	○		□	□
⊙	○	○		□	□

*Assan*

Inspector

Acknowledged Receipt : Tim Viveiros

Page 1 of 7

## Food Establishment Inspection Report - FDA

### Good Hygienic Practices

7. No discharge from eyes, nose, and mouth

IN	OUT	N/O	N/A	COS	REPEAT
<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>

### Control of Hands as a Vehicle of Contamination

8A. Hands clean & properly washed

<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>
----------------------------------	-----------------------	-----------------------	--	--------------------------	--------------------------

8B. Where to wash, hand antiseptics

<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>
----------------------------------	-----------------------	-----------------------	--	--------------------------	--------------------------

9. No bare hand contact with RTE food or a pre-approved alternative procedure properly allowed

<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
----------------------------------	-----------------------	-----------------------	-----------------------	--------------------------	--------------------------

10A. Adequate handwashing sinks properly supplied and accessible

<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>
----------------------------------	-----------------------	--	--	--------------------------	--------------------------

10B. Handwashing sinks accessible with proper signage, handwashing aids

<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>
----------------------------------	-----------------------	--	--	--------------------------	--------------------------

### Approved Sources

11A. Milk, eggs, juice, bottled water, hermetically sealed food, game animals

<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
----------------------------------	-----------------------	-----------------------	-----------------------	--------------------------	--------------------------

11B. Packaged foods, labeling, whole muscle beef

<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
----------------------------------	-----------------------	-----------------------	-----------------------	--------------------------	--------------------------

11C. Obtaining raw fish, packaged meat & poultry, eggs

<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
----------------------------------	-----------------------	-----------------------	-----------------------	--------------------------	--------------------------

12A. Food received at proper temperature

<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
-----------------------	-----------------------	----------------------------------	-----------------------	--------------------------	--------------------------

12B. Shipping and receiving frozen food

<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
-----------------------	-----------------------	----------------------------------	-----------------------	--------------------------	--------------------------

13. Food in good condition, honestly presented, safe, & unadulterated

<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>
----------------------------------	-----------------------	--	--	--------------------------	--------------------------

13B. Food package integrity

<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>
----------------------------------	-----------------------	--	--	--------------------------	--------------------------

14A. Required records available: shellstock tags, parasite destruction

<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
-----------------------	-----------------------	-----------------------	----------------------------------	--------------------------	--------------------------

14B. Missing shellstock tags, destruction

<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
-----------------------	-----------------------	-----------------------	----------------------------------	--------------------------	--------------------------

14C. Parasite destruction- storing raw/partially cooked fish

<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
-----------------------	-----------------------	-----------------------	----------------------------------	--------------------------	--------------------------

### Protection from Contamination

15A. Food separated & protected

<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
----------------------------------	-----------------------	-----------------------	-----------------------	--------------------------	--------------------------

15B. Cleaning equip/utensils/food containers

<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
----------------------------------	-----------------------	-----------------------	-----------------------	--------------------------	--------------------------

16A. Food-contact surfaces: cleaned & sanitized immersion 171° F and above

<input checked="" type="radio"/>	<input type="radio"/>		<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
----------------------------------	-----------------------	--	-----------------------	--------------------------	--------------------------

16B. Food contact surfaces cleaned and sanitized NMT 194° F, NLT 180° F

<input type="radio"/>	<input type="radio"/>		<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
-----------------------	-----------------------	--	-----------------------	--------------------------	--------------------------

16C. Mechanical warewashing equipment sanitization food contact surfaces, equip., utensils

<input type="radio"/>	<input type="radio"/>		<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
-----------------------	-----------------------	--	-----------------------	--------------------------	--------------------------

17. Proper disposition of returned, previously served reconditions, & unsafe food

<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>
----------------------------------	-----------------------	--	--	--------------------------	--------------------------

### Time/Temperature Control for Safety Food (TCS Food)

18A. Proper cooking time & temperatures

<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
-----------------------	-----------------------	----------------------------------	-----------------------	--------------------------	--------------------------

18B. Whole meat cooking and serving, storing

<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
-----------------------	-----------------------	-----------------------	----------------------------------	--------------------------	--------------------------

18C. Microwave cooking of raw animal foods

<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
-----------------------	-----------------------	-----------------------	----------------------------------	--------------------------	--------------------------

19. Proper reheating procedures for hot holding

<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
-----------------------	-----------------------	-----------------------	----------------------------------	--------------------------	--------------------------

20. Proper cooling time & temperatures

<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
----------------------------------	-----------------------	-----------------------	-----------------------	--------------------------	--------------------------

21. Proper hot holding temperatures

<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
-----------------------	----------------------------------	-----------------------	-----------------------	--------------------------	-------------------------------------



Inspector

Acknowledged Receipt : Tim Viveiros

Page 2 of 7

## Food Establishment Inspection Report - FDA

Time/Temperature Control for Safety Food (TCS Food)

IN OUT N/O N/A COS REPEAT

Fail Notes 3-501.16 (A) *\*Hot TCS foods Maintained at or Above 135oF, Also for whole meat roasts (130F and above)  
[The temperature of the chilli was 184.6 degrees fahrenheit at the bottom of the container but 117.3 degrees fahrenheit near the top the the container. It is necessary to occasionally stir food products in hot holding units to distribute heat. Except during preparation, cooking, or cooling, or when time is used as the public health control, TCS (Time / Temperature Control for Safety Food) food shall be maintained at 135°F or above.]*

22. Proper cold holding temperatures

☐ ☒ ☐ ☐ ☐ ☒

**This item has Notes. See Footnote 1 at end of questionnaire.**

Fail Notes 3-501.16(A2 &B) *\*Cold PHFs Maintained at or Below 41oF- also pertains to untreated eggs (45F)  
[The temperature of the lettuce and tomatoes in the cold holding unit was 51.8 and 49.3 degrees fahrenheit respectively. It seems that this particular cold holding unit may not be able to keep foods at or below 41 degrees fahrenheit. It is necessary that the internal temperature of TCS foods is maintained at 41 degrees fahrenheit or below. Repair or replace any cold holding unit that is unable to keep foods at or below 41 degrees fahrenheit.]*

23. Proper Date Marking

☒ ☐ ☐ ☐ ☐ ☐

23B. TCS Foods Disposition

☒ ☐ ☐ ☐ ☐ ☐

24A. Time as a public health control: procedures

☐ ☐ ☐ ☒ ☐ ☐

24B. Time as a public health control: temperatures & discarding food

☐ ☐ ☐ ☒ ☐ ☐

24C. Time as a public health control: highly susceptible population (HSP)

☐ ☐ ☐ ☒ ☐ ☐

Consumer Advisory

IN OUT N/O N/A COS REPEAT

25. Consumer advisory provided for raw or undercooked foods

☐ ☐ ☐ ☒ ☐ ☐

Highly Susceptible Populations (HSP)

IN OUT N/O N/A COS REPEAT

26A. Pasteurized foods used; prohibited foods not offered

☐ ☐ ☐ ☒ ☐ ☐

26B. Reservice of foods

☐ ☐ ☐ ☒ ☐ ☐

Chemical

IN OUT N/O N/A COS REPEAT

27. Food additives: approved and properly used

☐ ☐ ☐ ☒ ☐ ☐

28A. Toxic substances identified, stored and used

☒ ☐ ☐ ☐ ☐ ☐

28B. Poisonous materials, sanitizers, additives, medicines restriction, separation, storage

☒ ☐ ☐ ☐ ☐ ☐

28C. Conditions of Use: law

☒ ☐ ☐ ☐ ☐ ☐

Conformance with Approved Procedures

IN OUT N/O N/A COS REPEAT

29A. Compliance with variance, specialized process, & HACCP plan

☐ ☐ ☐ ☒ ☐ ☐

29B. Treating juice- HACCP, reduced oxygen packaging w/out variance, conformance with approved procedures

☐ ☐ ☐ ☒ ☐ ☐



Inspector

Acknowledged Receipt : Tim Viveiros

Page 3 of 7

## Food Establishment Inspection Report - FDA

Conformance with Approved Procedures

IN OUT N/O N/A COS REPEAT

29C. When HACCP plan is required

☐ ☐ ☒ ☐ ☐

### GOOD RETAIL PRACTICES

Good Retail Practices are preventative measures to control the addition of pathogens, chemicals, and physical objects into foods.

IN = In compliance OUT = not in compliance COS - corrected on -site during inspection REPEAT = repeat violation

#### Safe Food and Water

IN OUT N/O N/A COS REPEAT

30. Pasteurized eggs used where required

☐ ☐ ☐ ☐

31A. Water & ice from approved source

☒ ☐ ☐ ☐

31B. Sampling, alternative water supply

☐ ☐ ☒ ☐ ☐

31C. Sampling report

☐ ☐ ☒ ☐ ☐

32. Variance obtained for specialized processing methods

☐ ☐ ☒ ☐ ☐

#### Food Temperature Control

IN OUT N/O N/A COS REPEAT

33A. Proper cooling methods used; adequate equipment for temperature control

☐ ☐ ☐ ☐

33B. Frozen food

☒ ☐ ☐ ☐

34. Plant food properly cooked for hot holding

☐ ☐ ☒ ☐ ☐

35. Approved thawing methods used

☐ ☐ ☒ ☐ ☐

36A. Thermometers provided and accurate

☒ ☐ ☐ ☐

36B. Thermometers function properly

☒ ☐ ☐ ☐

#### Food Identification

IN OUT COS REPEAT

37A. Food properly labeled; original container

☒ ☐ ☐ ☐

37B. Food labels, labeling of ingredients

☒ ☐ ☐ ☐

#### Prevention of Food Contamination

IN OUT COS REPEAT

38A. Insects, rodents, & animals not present

☒ ☐ ☐ ☐

38B. Handling prohibition, controlling pests, prohibiting animals

☒ ☐ ☐ ☐

39A. Contamination prevented during food storage

☒ ☐ ☐ ☐

39B. Food display; ice used as an exterior coolant prohibited as an ingredient

☒ ☐ ☐ ☐

39C. Consumer self-service operations- utensils and monitoring

☒ ☐ ☐ ☐

40A. Personal cleanliness- prohibition jewelry

☒ ☐ ☐ ☐

40B. Maintenance of fingernails

☒ ☐ ☐ ☐

41. Wiping cloths; properly used and stored

☒ ☐ ☐ ☐

42A. Washing Produce - following chemical manufacturers label

☐ ☐ ☐ ☐

42B. Washing produce

☒ ☐ ☐ ☐

42C. Washing produce- chemicals

☐ ☐ ☐ ☐

Inspector

Acknowledged Receipt : Tim Viveiros

Page 4 of 7

## Food Establishment Inspection Report - FDA

### Proper Use of Utensils

	IN	OUT	COS	REPEAT
43. In-use utensils; properly stored	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
44. Utensils, equipment & linens; properly stored, dried, and handled	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
45A. Single-use/ single service articles properly stored and used, required	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
45B. Single-use/service articles use limitation, kitchenware and tableware preventing contamination	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
46. Gloves used properly	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

### Utensils, Equipment and Vending

	IN	OUT	COS	REPEAT
47A. Food & non-food contact surfaces cleanable	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
47B. Food contact surfaces /utensils cleanability, molluscan shellfish tanks, consumer self-service	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
47C. Properly designed characteristics: food and non-food contact surfaces, molluscan shellfish tanks	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
48A. Warewashing facilities: installed, maintained, & used; test strips	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
48B. Operational warewashing machines	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
49. Non-food contact surfaces clean	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

### Physical Facilities

	IN	OUT	N/A	COS	REPEAT
50. Hot & cold water available; adequate pressure	<input checked="" type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>
51A. Plumbing installed; proper backflow devices	<input checked="" type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>
51B. Prohibiting a cross-connection, inspection and servicing system	<input checked="" type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>
51C. Approved system and cleanable fixtures, service sink	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
52A. Sewage and waste water properly disposed	<input checked="" type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>
52B. Grease traps easily accessible for cleaning	<input checked="" type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>
52C. Removing mobile food establishment waste	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
53A. Toilet facilities; properly constructed, supplied, & cleaned	<input checked="" type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>
53B. Toilet tissue availability	<input checked="" type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>
54. Garbage & refuse properly disposed; facilities maintained	<input checked="" type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>
55A. Physical facilities installed, maintained, & clean	<input checked="" type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>
55B. Private homes and living or sleeping quarters, use prohibition	<input checked="" type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>
56. Adequate ventilation & lighting; designated areas used	<input checked="" type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>

### MASSACHUSETTS ONLY REGULATIONS

Rules and Regulations adopted for use in Massachusetts only.

### Facilities

	IN	OUT	COS	REPEAT
57A. Catering	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
57B. When plans are reviewed, prerequisite for operations- valid permit	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>



Inspector

Acknowledged Receipt : Tim Viveiros

Page 5 of 7

## Food Establishment Inspection Report - FDA

### Facilities

57C. Contents of plans and specifications, preoperational inspections

IN OUT COS REPEAT

☐ ☐ ☐ ☐

58. Mobile Food Operations

☐ ☐ ☐ ☐

59. Temporary Food Establishments

☐ ☐ ☐ ☐

60. Residential Kitchens

☐ ☐ ☐ ☐

### Procedures

61. Anti-choking Procedures

IN OUT COS REPEAT

☐ ☐ ☐ ☐

62. Tobacco Products: Notice and Sale

☐ ☐ ☐ ☐

63. Food Allergy Awareness Requirements

☐ ☐ ☐ ☐



Inspector

Acknowledged Receipt : Tim Viveiros

Page 6 of 7

## Food Establishment Inspection Report - FDA

### Footnote 1

#### Notes:

This is a repeat violation from the last inspection.

The cold holding unit containing the lettuce and tomatoes does not appear to be keeping these foods at the required temperature of 41 degrees fahrenheit or below. The cold holding unit that containing the tuna mayonnaise and the tomato/cucumber mix, recorded temperatures of 37.4 and 40.3 degrees fahrenheit respectively.



Inspector

Acknowledged Receipt : Tim Viveiros

Page 7 of 7



City of Newton  
Health and Human Services  
Deborah Youngblood, PhD, Commissioner  
1000 Commonwealth Ave Newton, MA 02459  
(617) 796-1420



Public Health  
Prevent. Promote. Protect.

Food Establishment Inspection Report - FDA

Insp Date: 6/3/2019 Business ID: 1N2083  
Business: Brown Middle School  
125 Meadowbrook Rd.  
Newton, MA 02459

Inspection: 6N000129  
Section: 2  
Phone: 552-7409  
Inspector: 1N11123 Nicola Assan  
Reason: 1-Routine  
Results: No Follow-up R2

Inspection Summary

Official Order for Correction: Based on an inspection today, the items checked indicate violations of 105 CMR 590.000/ 2013 Federal Food Code. This report, when signed below by the Commissioner of Health / Agent constitutes an order by the Commissioner of Health. Failure to correct violations cited in this report may result in suspension or revocation of the food establishment permit and cessation of food establishment operations. If aggrieved by this order, you have the right to a hearing. The request must be in writing and submitted to the Commissioner of Health at the above address within 10 days of receipt of this order.

Est. Type 1 - Food Svc Establis License/Permit # \_\_\_\_\_ Risk Category 02 Risk Level Observed 01 Low

Foodborne Illness Complaint Investigated (All) ☐ Involving More Than Two Persons ☐

FOODBORNE ILLNESS RISK FACTORS AND PUBLIC HEALTH INTERVENTIONS

Compliance status: IN = in compliance OUT = not in compliance N/O = not observed N/A = not applicable

Marked in appropriate box for COS and/or R. COS = corrected on-site during inspection R = repeat violation

Risk factors are improper practices or procedures identified as the most prevalent contributing factors of foodborne illness or injury. Public Health Interventions are control measures to prevent foodborne illnesses or injury.

Supervision

- 1. PIC Present, Knowledge and Duties
- 2. Certified Food Protection Manager

IN	OUT	N/O	N/A	COS	REPEAT
<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>
<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>

Employee Health / Responding to Contamination Events

- 3A. Employee Health: PIC Knowledge, Responsibilities & Reporting
- 3B. Employee Reporting to PIC
- 4. Proper Use of Restriction & Exclusion
- 5. Clean-up of Vomiting and Diarrheal Events

IN	OUT	N/O	N/A	COS	REPEAT
<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>
<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>
<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>
<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>

Good Hygienic Practices

- 6A. Proper eating, tasting, drinking, or tobacco use
- 6B. Preventing contamination when tasting

IN	OUT	N/O	N/A	COS	REPEAT
<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>
<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>

Assan

Inspector

Acknowledged Receipt : Tim Viveiros

Page 1 of 5

## Food Establishment Inspection Report - FDA

### Good Hygienic Practices

7. No discharge from eyes, nose, and mouth

IN	OUT	N/O	N/A	COS	REPEAT
<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>

### Control of Hands as a Vehicle of Contamination

8A. Hands clean & properly washed

8B. Where to wash, hand antiseptics

9. No bare hand contact with RTE food or a pre-approved alternative procedure properly allowed

10A. Adequate handwashing sinks properly supplied and accessible

10B. Handwashing sinks accesible with proper signage, handwashing aids

IN	OUT	N/O	N/A	COS	REPEAT
<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>
<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>
<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>
<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>

### Approved Sources

11A. Milk, eggs, juice, bottled water, hermetically sealed food, game animals

11B. Packaged foods, labeling, whole muscle beef

11C. Obtaining raw fish, packaged meat & poultry, eggs

12A. Food received at proper temperature

12B. Shipping and receiving frozen food

13. Food in good condition, honestly presented, safe, & unadulterated

13B. Food package integrity

14A. Required records available: shellstock tags, parasite destruction

14B. Missing shellstock tags, destruction

14C. Parasite destruction- storing raw/partially cooked fish

IN	OUT	N/O	N/A	COS	REPEAT
<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>
<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

### Protection from Contamination

15A. Food separated & protected

15B. Cleaning equip/utensils/food containers

16A. Food-contact surfaces: cleaned & sanitized immersion 171° F and above

16B. Food contact surfaces cleaned and sanitized NMT 194° F, NLT 180° F

16C. Mechanical warewashing equipment sanitization food contact surfaces, equip., utensils

17. Proper disposition of returned, previously served reconditions, & unsafe food

IN	OUT	N/O	N/A	COS	REPEAT
<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input checked="" type="radio"/>	<input type="radio"/>		<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input checked="" type="radio"/>	<input type="radio"/>		<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input checked="" type="radio"/>	<input type="radio"/>		<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>

### Time/Temperature Control for Safety Food (TCS Food)

18A. Proper cooking time & temperatures

18B. Whole meat cooking and serving, storing

18C. Microwave cooking of raw animal foods

19. Proper reheating procedures for hot holding

20. Proper cooling time & temperatures

21. Proper hot holding temperatures

IN	OUT	N/O	N/A	COS	REPEAT
<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

*Assan*

Inspector

Acknowledged Receipt : Tim Viveiros

Page 2 of 5

## Food Establishment Inspection Report - FDA

Time/Temperature Control for Safety Food (TCS Food)

IN OUT N/O N/A COS REPEAT

Fail Notes 3-501.16 (A) \*Hot TCS foods Maintained at or Above 135oF, Also for whole meat roasts (130F and above)  
[The temperature of the TCS foods (chicken burgers) in the hot holding unit had a temperature of 117.3 degrees F. Maintaining TCS (time/temperature control for safety) food at a temperature of 135 degrees F or greater during hot holding is sufficient to prevent the growth of pathogens and is therefore an effective measure in the prevention of foodborne illness.]

- |   |                                  |                       |                       |                                  |                          |                          |
|---|----------------------------------|-----------------------|-----------------------|----------------------------------|--------------------------|--------------------------|
| 22. Proper cold holding temperatures                                      | <input checked="" type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/>            | <input type="checkbox"/> | <input type="checkbox"/> |
| 23. Proper Date Marking   | <input checked="" type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/>            | <input type="checkbox"/> | <input type="checkbox"/> |
| 23B. TCS Foods Disposition  | <input checked="" type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/>            | <input type="checkbox"/> | <input type="checkbox"/> |
| 24A. Time as a public health control: procedures                          | <input type="radio"/>            | <input type="radio"/> | <input type="radio"/> | <input checked="" type="radio"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 24B. Time as a public health control: temperatures & discarding food      | <input type="radio"/>            | <input type="radio"/> | <input type="radio"/> | <input checked="" type="radio"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 24C. Time as a public health control: highly susceptible population (HSP) | <input type="radio"/>            | <input type="radio"/> | <input type="radio"/> | <input checked="" type="radio"/> | <input type="checkbox"/> | <input type="checkbox"/> |

### Consumer Advisory

IN OUT N/O N/A COS REPEAT

- |   |                       |                       |                       |                                  |                          |                          |
|---|-----------------------|-----------------------|-----------------------|----------------------------------|--------------------------|--------------------------|
| 25. Consumer advisory provided for raw or undercooked foods | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input checked="" type="radio"/> | <input type="checkbox"/> | <input type="checkbox"/> |
|---|-----------------------|-----------------------|-----------------------|----------------------------------|--------------------------|--------------------------|

### Highly Susceptible Populations (HSP)

IN OUT N/O N/A COS REPEAT

- |   |                       |                       |                       |                                  |                          |                          |
|---|-----------------------|-----------------------|-----------------------|----------------------------------|--------------------------|--------------------------|
| 26A. Pasteurized foods used; prohibited foods not offered | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input checked="" type="radio"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 26B. Reservice of foods                                   | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input checked="" type="radio"/> | <input type="checkbox"/> | <input type="checkbox"/> |

### Chemical

IN OUT N/O N/A COS REPEAT

- |   |                                  |                       |                       |                                  |                          |                          |
|---|----------------------------------|-----------------------|-----------------------|----------------------------------|--------------------------|--------------------------|
| 27. Food additives: approved and properly used  | <input type="radio"/>            | <input type="radio"/> | <input type="radio"/> | <input checked="" type="radio"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 28A. Toxic substances identified, stored and used   | <input checked="" type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/>            | <input type="checkbox"/> | <input type="checkbox"/> |
| 28B. Poisonous materials, sanitizers, additives, medicines restriction, separation, storage | <input checked="" type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/>            | <input type="checkbox"/> | <input type="checkbox"/> |
| 28C. Conditions of Use: law   | <input checked="" type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/>            | <input type="checkbox"/> | <input type="checkbox"/> |

### Conformance with Approved Procedures

IN OUT N/O N/A COS REPEAT

- |   |                       |                       |                       |                                  |                          |                          |
|---|-----------------------|-----------------------|-----------------------|----------------------------------|--------------------------|--------------------------|
| 29A. Compliance with variance, specialized process, & HACCP plan  | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input checked="" type="radio"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 29B. Treating juice- HACCP, reduced oxygen packaging w/out variance, conformance with approved procedures | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input checked="" type="radio"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 29C. When HACCP plan is required  | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input checked="" type="radio"/> | <input type="checkbox"/> | <input type="checkbox"/> |

### GOOD RETAIL PRACTICES

Good Retail Practices are preventative measures to control the addition of pathogens, chemicals, and physical objects into foods.

IN = In compliance OUT = not in compliance COS - corrected on -site during inspection REPEAT = repeat violation

### Safe Food and Water

IN OUT N/O N/A COS REPEAT

- |  |                                  |                       |                       |                       |                          |                          |
|--|----------------------------------|-----------------------|-----------------------|-----------------------|--------------------------|--------------------------|
| 30. Pasteurized eggs used where required | <input type="radio"/>            | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 31A. Water & ice from approved source    | <input checked="" type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="checkbox"/> | <input type="checkbox"/> |

*Assan*

Inspector

Acknowledged Receipt : Tim Viveiros

Page 3 of 5

## Food Establishment Inspection Report - FDA

Safe Food and Water	IN	OUT	N/O	N/A	COS	REPEAT
---------------------	----	-----	-----	-----	-----	--------

31B. Sampling, alternative water supply

☐ IN   ☐ OUT   ☒ N/O   ☐ N/A   ☐ COS   ☐ REPEAT

31C. Sampling report

☐ IN   ☐ OUT   ☒ N/O   ☐ N/A   ☐ COS   ☐ REPEAT

32. Variance obtained for specialized processing methods

☐ IN   ☐ OUT   ☒ N/O   ☐ N/A   ☐ COS   ☐ REPEAT

Food Temperature Control	IN	OUT	N/O	N/A	COS	REPEAT
--------------------------	----	-----	-----	-----	-----	--------

33A. Proper cooling methods used; adequate equipment for temperature control

☐ IN   ☐ OUT   ☐ N/O   ☐ N/A   ☐ COS   ☐ REPEAT

33B. Frozen food

☒ IN   ☐ OUT   ☐ N/O   ☐ N/A   ☐ COS   ☐ REPEAT

34. Plant food properly cooked for hot holding

☐ IN   ☐ OUT   ☒ N/O   ☐ N/A   ☐ COS   ☐ REPEAT

35. Approved thawing methods used

☐ IN   ☐ OUT   ☒ N/O   ☐ N/A   ☐ COS   ☐ REPEAT

36A. Thermometers provided and accurate

☒ IN   ☐ OUT   ☐ N/O   ☐ N/A   ☐ COS   ☐ REPEAT

36B. Thermometers function properly

☒ IN   ☐ OUT   ☐ N/O   ☐ N/A   ☐ COS   ☐ REPEAT

Food Identification	IN	OUT	COS	REPEAT
---------------------	----	-----	-----	--------

37A. Food properly labeled; original container

☒ IN   ☐ OUT   ☐ COS   ☐ REPEAT

37B. Food labels, labeling of ingredients

☒ IN   ☐ OUT   ☐ COS   ☐ REPEAT

Prevention of Food Contamination	IN	OUT	COS	REPEAT
----------------------------------	----	-----	-----	--------

38A. Insects, rodents, & animals not present

☒ IN   ☐ OUT   ☐ COS   ☐ REPEAT

38B. Handling prohibition, controlling pests, prohibiting animals

☒ IN   ☐ OUT   ☐ COS   ☐ REPEAT

39A. Contamination prevented during food storage

☒ IN   ☐ OUT   ☐ COS   ☐ REPEAT

39B. Food display; ice used as an exterior coolant prohibited as an ingredient

☒ IN   ☐ OUT   ☐ COS   ☐ REPEAT

39C. Consumer self-service operations- utensils and monitoring

☒ IN   ☐ OUT   ☐ COS   ☐ REPEAT

40A. Personal cleanliness- prohibition jewelry

☒ IN   ☐ OUT   ☐ COS   ☐ REPEAT

40B. Maintenance of fingernails

☒ IN   ☐ OUT   ☐ COS   ☐ REPEAT

41. Wiping cloths; properly used and stored

☒ IN   ☐ OUT   ☐ COS   ☐ REPEAT

42A. Washing Produce - following chemical manufacturers label

☐ IN   ☐ OUT   ☐ COS   ☐ REPEAT

42B. Washing produce

☒ IN   ☐ OUT   ☐ COS   ☐ REPEAT

42C. Washing produce- chemicals

☐ IN   ☐ OUT   ☐ COS   ☐ REPEAT

Proper Use of Utensils	IN	OUT	COS	REPEAT
------------------------	----	-----	-----	--------

43. In-use utensils; properly stored

☒ IN   ☐ OUT   ☐ COS   ☐ REPEAT

44. Utensils, equipment & linens; properly stored, dried, and handled

☒ IN   ☐ OUT   ☐ COS   ☐ REPEAT

45A. Single-use/ single service articles properly stored and used, required

☒ IN   ☐ OUT   ☐ COS   ☐ REPEAT

45B. Single-use/service articles use limitation, kitchenware and tableware preventing contamination

☒ IN   ☐ OUT   ☐ COS   ☐ REPEAT

46. Gloves used properly

☒ IN   ☐ OUT   ☐ COS   ☐ REPEAT

Utensils, Equipment and Vending	IN	OUT	COS	REPEAT
---------------------------------	----	-----	-----	--------

47A. Food & non-food contact surfaces cleanable

☒ IN   ☐ OUT   ☐ COS   ☐ REPEAT

*Assan*

Inspector

Acknowledged Receipt : Tim Viveiros

Page 4 of 5

## Food Establishment Inspection Report - FDA

### Utensils, Equipment and Vending

	IN	OUT	COS	REPEAT
47B. Food contact surfaces /utensils cleanability, molluscan shellfish tanks, consumer self-service	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
47C. Properly designed characteristics: food and non-food contact surfaces, molluscan shellfish tanks	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
48A. Warewashing facilities: installed, maintained, & used; test strips	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
48B. Operational warewashing machines	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
49. Non-food contact surfaces clean	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

### Physical Facilities

	IN	OUT	N/A	COS	REPEAT
50. Hot & cold water available; adequate pressure	<input checked="" type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>
51A. Plumbing installed; proper backflow devices	<input checked="" type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>
51B. Prohibiting a cross-connection, inspection and servicing system	<input checked="" type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>
51C. Approved system and cleanable fixtures, service sink	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
52A. Sewage and waste water properly disposed	<input checked="" type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>
52B. Grease traps easily accessible for cleaning	<input checked="" type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>
52C. Removing mobile food establishment waste	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
53A. Toilet facilities; properly constructed, supplied, & cleaned	<input checked="" type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>
53B. Toilet tissue availability	<input checked="" type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>
54. Garbage & refuse properly disposed; facilities maintained	<input checked="" type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>
55A. Physical facilities installed, maintained, & clean	<input checked="" type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>
55B. Private homes and living or sleeping quarters, use prohibition	<input checked="" type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>
56. Adequate ventilation & lighting; designated areas used	<input checked="" type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>

### MASSACHUSETTS ONLY REGULATIONS

Rules and Regulations adopted for use in Massachusetts only.

#### Facilities

	IN	OUT	COS	REPEAT
57A. Catering	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
57B. When plans are reviewed, prerequisite for operations- valid permit	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
57C. Contents of plans and specifications, preoperational inspections	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
58. Mobile Food Operations	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
59. Temporary Food Establishments	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
60. Residential Kitchens	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

#### Procedures

	IN	OUT	COS	REPEAT
61. Anti-choking Procedures	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
62. Tobacco Products: Notice and Sale	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
63. Food Allergy Awareness Requirements	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

*Mass*

Inspector

Acknowledged Receipt : Tim Viveiros

Page 5 of 5



City of Newton  
Health and Human Services  
Deborah Youngblood, PhD, Commissioner  
1000 Commonwealth Ave Newton, MA 02459  
(617) 796-1420



Public Health  
Prevent, Promote, Protect

Food Establishment Inspection Report - FDA

Insp Date: 3/27/2017  
Business: Burr School  
171 Pine St.

Business ID: 1N2088

Newton, MA 02466

Inspection: CN000313

Section: 4

Phone: 559-9360

Inspector: RS764 John McNally

Reason: 1-Routine

Results: No Follow-up

Inspection Summary

Official Order for Correction: Based on an inspection today, the items checked indicate violations of 105 CMR 590.000/ 2009 Federal Food Code. This report, when signed below by the Commissioner of Health / Agent constitutes an order by the Commissioner of Health. Failure to correct violations cited in this report may result in suspension or revocation of the food establishment permit and cessation of food establishment operations. If aggrieved by this order, you have the right to a hearing. The request must be in writing and submitted to the Commissioner of Health at the above address within 10 days of receipt of this order.

Est. Type 1 - Food Svc Establis License/Permit # \_\_\_\_\_ Risk Category 02 Risk Level Observed 02 Low

FOODBORNE ILLNESS RISK FACTORS AND PUBLIC HEALTH INTERVENTIONS

Compliance status: IN = in compliance OUT = not in compliance N/O = not observed N/A = not applicable

Marked in appropriate box for COS and/or R. COS = corrected on-site during inspection R = repeat violation

Risk factors are improper practices or procedures identified as the most prevalent contributing factors of foodborne illness or injury. Public Health Interventions are control measures to prevent foodborne illnesses or injury.

Supervision

1A. PIC Present

IN OUT N/O N/A COS REPEAT

☒ ☐ ☐ ☐ ☐ ☐

B. Cert. food manager, knowledge, no critical violations

☒ ☐ ☐ ☐ ☐ ☐

C. Duties of PIC

☒ ☐ ☐ ☐ ☐ ☐

Employee Health

2. Management, food employee and conditional employee; knowledge, responsibilities and reporting

IN OUT N/O N/A COS REPEAT

☒ ☐ ☐ ☐ ☐ ☐

3. Proper use of restriction and exclusion

☒ ☐ ☐ ☐ ☐ ☐

Good Hygienic Practices

4A. Proper eating, tasting, drinking, or tobacco use

IN OUT N/O N/A COS REPEAT

☒ ☐ ☐ ☐ ☐ ☐

B. Preventing contamination when tasting

☒ ☐ ☐ ☐ ☐ ☐

5. No discharge from eyes, nose, and mouth

☒ ☐ ☐ ☐ ☐ ☐

*John McNally RS*

Inspector

Acknowledged Receipt : DAVID HULETI

Page 1 of 5

## Food Establishment Inspection Report - FDA

### Preventing Contamination by Hands

6A. Hands clean & properly washed

IN OUT N/O N/A COS REPEAT

☒ ☐ ☐ ☐ ☐

B. Where to wash, hand antiseptics

☒ ☐ ☐ ☐ ☐

7. No bare hand contact with RTE food or a pre-approved alternative procedure properly allowed

☒ ☐ ☐ ☐ ☐ ☐

8A. Adequate handwashing sinks properly supplied and accessible

☒ ☐ ☐ ☐

B. Handwashing sinks accessible with proper signage, handwashing aids

☒ ☐ ☐ ☐

C. Conveniently located handwashing sink

☒ ☐ ☐ ☐

### Approved Sources

9A. Milk, eggs, juice, bottled water, hermetically sealed food

☒ ☐ ☐ ☐

B. Fish and shellfish

☐ ☐ ☐ ☒ ☐ ☐

10. Food received at proper temperature

☐ ☐ ☒ ☐ ☐ ☐

11. Food in good condition, safe, & unadulterated

☒ ☐ ☐ ☐

### Protection from Contamination

12A. Food separated & protected

☐ ☒ ☐ ☐ ☐ ☐

*Fail Notes* | 3-302.11 \*Packaged and Unpackaged Food - Separation, Packaging, and Segregation  
[some foods on service table such as burger and fries were not covered or protected.]

B. Gloves, use limitation, one task- contaminated

☒ ☐ ☐ ☐ ☐ ☐

13A. Food-contact surfaces: cleaned & sanitized 171° F

☒ ☐ ☐ ☐ ☐ ☐

B. Food contact surfaces cleaned and sanitized NMT 194° F, NLT 180° F

☒ ☐ ☐ ☐ ☐ ☐

C. Mechanical warewashing equipment sanitization food contact surfaces, equip., utensils

☒ ☐ ☐ ☐ ☐

14. Proper disposition of returned, previously served reconditions, & unsafe food

☐ ☐ ☐ ☐

### Potentially Hazardous Food Time/Temperature

15. Proper cooking time & temperatures

☒ ☐ ☐ ☐ ☐ ☐

16. Proper reheating procedures for hot holding

☒ ☐ ☐ ☐ ☐ ☐

17. Proper cooling time & temperatures

☐ ☐ ☐ ☒ ☐ ☐

18. Proper hot holding temperatures

☐ ☒ ☐ ☐ ☐ ☐

*Fail Notes* | 3-501.16 (A) \*Hot PHFs Maintained at or Above 135oF  
[hot hoding box temperature 103 to 114F. Water reservoir not being used. Manager added water.]

19. Proper cold holding temperatures

☐ ☒ ☐ ☐ ☐ ☐

*Fail Notes* | 3-501.16(B) [590.004(F)] \*Cold PHFs Maintained at or Below 41oF  
[condiments that require refrigeration after opening were at 52 to 54F. Icing or other suitable method is required to keep them at 41F or colder.]

20. Time as a public health control: procedures & record

☐ ☐ ☐ ☒ ☐ ☐

*John M. Kelly RS*

Inspector

Acknowledged Receipt : DAVID HULETI

Page 2 of 5

## Food Establishment Inspection Report - FDA

### Highly Susceptible Populations

21. Pasteurized foods used; prohibited foods not offered

IN	OUT	N/O	N/A	COS	REPEAT
<input type="radio"/>	<input type="radio"/>		<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

### Chemical

22. Food additives: approved and properly used

IN	OUT	N/O	N/A	COS	REPEAT
<input checked="" type="radio"/>	<input type="radio"/>		<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

23A. Toxic substances properly identified, stored and used

<input checked="" type="radio"/>	<input type="radio"/>		<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
----------------------------------	-----------------------	--	-----------------------	--------------------------	--------------------------

B. Restriction presence and use, restriction and storage of medicines

<input checked="" type="radio"/>	<input type="radio"/>		<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
----------------------------------	-----------------------	--	-----------------------	--------------------------	--------------------------

C. Storage- other personal care items

<input checked="" type="radio"/>	<input type="radio"/>		<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
----------------------------------	-----------------------	--	-----------------------	--------------------------	--------------------------

### GOOD RETAIL PRACTICES

Good Retail Practices are preventative measures to control the addition of pathogens, chemicals, and physical objects into foods.

IN = In compliance    OUT = not in compliance    COS - corrected on -site during inspection    REPEAT = repeat violation

### Safe Food and Water

24. Water & ice from approved source

IN	OUT	N/O	N/A	COS	REPEAT
<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

### Food Temperature Control

25A. Proper cooling methods used; adequate equipment for temperature control

<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
----------------------------------	-----------------------	-----------------------	-----------------------	--------------------------	--------------------------

B. Frozen food

<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
-----------------------	-----------------------	-----------------------	----------------------------------	--------------------------	--------------------------

26. Plant food properly cooked for hot holding

<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
----------------------------------	-----------------------	-----------------------	-----------------------	--------------------------	--------------------------

27. Approved thawing methods used

<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
-----------------------	-----------------------	-----------------------	----------------------------------	--------------------------	--------------------------

28A. Thermometers provided and accurate

<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
----------------------------------	-----------------------	-----------------------	-----------------------	--------------------------	--------------------------

B. Thermometers function properly

<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
----------------------------------	-----------------------	-----------------------	-----------------------	--------------------------	--------------------------

### Food Identification

29A. Food properly labeled; original container

IN	OUT	COS	REPEAT
<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

B. Food labels, labeling of ingredients

<input type="radio"/>	<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
-----------------------	----------------------------------	--------------------------	--------------------------

Fail Notes    3-602.11 [590.004(J)]

\*Labelling of Ingredients

[some packaged food did not have all the ingredients listed.]

### Prevention of Food Contamination

30A. Insects, rodents, & animals not present

IN	OUT	COS	REPEAT
<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

B. Handling prohibition, controlling pests, prohibiting animals

<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
----------------------------------	-----------------------	--------------------------	--------------------------

31A. Contamination prevented during food storage

<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
-----------------------	-----------------------	--------------------------	--------------------------

B. Food display; ice used as an exterior coolant prohibited as an ingredient

<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
-----------------------	-----------------------	--------------------------	--------------------------

C. Consumer self-service operations- utensils and monitoring

<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
-----------------------	-----------------------	--------------------------	--------------------------

32A. Personal cleanliness- prohibition jewelry

<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
----------------------------------	-----------------------	--------------------------	--------------------------

B. Maintenance of fingernails

<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
----------------------------------	-----------------------	--------------------------	--------------------------

33. Wiping cloths; properly used and stored

<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
----------------------------------	-----------------------	--------------------------	--------------------------

34. Washing fruits & vegetables

<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
----------------------------------	-----------------------	--------------------------	--------------------------

*John McHally RS*

Inspector

Acknowledged Receipt : DAVID HULETI

Page 3 of 5

## Food Establishment Inspection Report - FDA

### Proper Use of Utensils

	IN	OUT	COS	REPEAT
35. In-use utensils; properly stored	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
36. Utensils, equipment & linens; properly stored, dried, and handled	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
37A. Single-use/ single service articles properly stored and used, required	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
B. Single-use/service articles use limitation, kitchenware and tableware preventing contamination	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
38. Gloves used properly	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

### Utensils, Equipment and Vending

	IN	OUT	COS	REPEAT
39A. Food & non-food contact surfaces cleanable	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
B. Food contact surfaces /utensils cleanability, molluscan shellfish tanks, consumer self-servic	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
C. Properly designed characteristics: food and non-food contact surfaces, molluscan shellfish tanks	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
40A. Warewashing facilities: installed, maintained, & used; test strips	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
B. Operational warewashing machines	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
41. Non-food contact surfaces clean	<input type="radio"/>	<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

*Fail Notes*    4-601.11 (B&C)    \*Equipment, Food-Contact Surfaces, Nonfood-Contact Surfaces, and Utensils  
*[utensil drawer in stainless table needs cleaning.]*

### Physical Facilities

	IN	OUT	N/O	N/A	COS	REPEAT
42. Hot & cold water available; adequate pressure	<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>
43A. Plumbing installed; proper backflow devices	<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>
B. Prohibiting a cross-connection, non-drinking water, system maintained in good repair	<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>
C. Approved system and cleanable fixtures, service sink	<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>
44A. Sewage and waste water properly disposed	<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>
B. Grease traps easily accessible for cleaning	<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>
45A. Toilet facilities; properly constructed, supplied, & cleaned	<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>
B. Toilet tissue availability	<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>
46. Garbage & refuse properly disposed; facilities maintained	<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>
47A. Physical facilities installed, maintained, & clean	<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>
B. Cleaning maintenance tools, preventing contamination	<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>
48. Adequate ventilation & lighting; designated areas used	<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>

### MASSACHUSETTS ONLY REGULATIONS

Rules and Regulations adopted for use in Massachusetts only.

### Facilities

	IN	OUT	COS	REPEAT
49A. When plans are reviewed, prerequisite for operations- valid permit	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

*John M. Kelly RS*

Inspector

Acknowledged Receipt : DAVID HULETI

Page 4 of 5

## Food Establishment Inspection Report - FDA

### Facilities

B. Contents of plans and specifications, preoperational inspections

IN OUT COS REPEAT

☐ ☐ ☐ ☐

### Procedures

50. Anti-choking Procedures

IN OUT COS REPEAT

☐ ☐ ☐ ☐

51. Tobacco Products: Notice and Sale

☐ ☐ ☐ ☐



Inspector

Acknowledged Receipt : DAVID HULETI

Page 5 of 5



**City of Newton**  
**Health and Human Services**  
 Deborah Youngblood, PhD, Commissioner  
 1000 Commonwealth Ave Newton, MA 02459  
 (617) 796-1420



**Public Health**  
 Prevent. Promote. Protect.

**Food Establishment Inspection Report - FDA**

**Insp Date:** 1/29/2018  
**Business:** Burr School  
 171 Pine St.

Newton, MA 02466

**Business ID:** 1N2088

**Inspection:** 6N000016

**Section:** 4

**Phone:** 559-9360

**Inspector:** 1N11123 Nicola Assan

**Reason:** 1-Routine

**Results:** No Follow-up R2

**Inspection Summary**

Official Order for Correction: Based on an inspection today, the items checked indicate violations of 105 CMR 590.000/ 2013 Federal Food Code. This report, when signed below by the Commissioner of Health / Agent constitutes an order by the Commissioner of Health. Failure to correct violations cited in this report may result in suspension or revocation of the food establishment permit and cessation of food establishment operations. If aggrieved by this order, you have the right to a hearing. The request must be in writing and submitted to the Commissioner of Health at the above address within 10 days of receipt of this order.

Est. Type 1 - Food Svc Establis License/Permit # \_\_\_\_\_ Risk Category 02 Risk Level Observed 02 Low

Foodborne Illness Complaint Investigated (All) ☐ Involving More Than Two Persons ☐

**FOODBORNE ILLNESS RISK FACTORS AND PUBLIC HEALTH INTERVENTIONS**

Compliance status: IN = in compliance OUT = not in compliance N/O = not observed N/A = not applicable

Marked in appropriate box for COS and/or R. COS = corrected on-site during inspection R = repeat violation

Risk factors are improper practices or procedures identified as the most prevalent contributing factors of foodborne illness or injury. Public Health Interventions are control measures to prevent foodborne illnesses or injury.

**Supervision**

1. PIC Present, Knowledge and Duties

IN OUT N/O N/A COS REPEAT

☒ ☐ ☐ ☐ ☐ ☐

2. Certified Food Protection Manager

☐ ☒ ☐ ☐ ☐ ☐

*Fail Notes* 2-102.12 (A)

*Certified food protection manager  
 [The person in charge (PIC) did not have a serve safe  
 certificate. One means by which a person in charge may  
 demonstrate required knowledge of food safety is  
 through certification by passing an examination that is  
 part of an accredited program.]*

**Employee Health / Responding to Contamination Events**

3A. Employee Health: PIC Knowledge, Responsibilities & Reporting

IN OUT N/O N/A COS REPEAT

☒ ☐ ☐ ☐ ☐ ☐

3B. Employee Reporting to PIC

☒ ☐ ☐ ☐ ☐ ☐

4. Proper Use of Restriction & Exclusion

☒ ☐ ☐ ☐ ☐ ☐

5. Clean-up of Vomiting and Diarrheal Events

☒ ☐ ☐ ☐ ☐ ☐

Inspector \_\_\_\_\_

Acknowledged Receipt : \_\_\_\_\_

Page 1 of 7

## Food Establishment Inspection Report - FDA

### Good Hygienic Practices

- 6A. Proper eating, tasting, drinking, or tobacco use
- 6B. Preventing contamination when tasting
- 7. No discharge from eyes, nose, and mouth

IN OUT N/O N/A COS REPEAT

⊙ ○ ○ □ □  
 ⊙ ○ ○ □ □  
 ⊙ ○ ○ □ □

### Control of Hands as a Vehicle of Contamination

- 8A. Hands clean & properly washed
- 8B. Where to wash, hand antiseptics
- 9. No bare hand contact with RTE food or a pre-approved alternative procedure properly allowed
- 10A. Adequate handwashing sinks properly supplied and accessible  
*This item has Notes. See Footnote 1 at end of questionnaire.*
- 10B. Handwashing sinks accessible with proper signage, handwashing aids

IN OUT N/O N/A COS REPEAT

⊙ ○ ○ □ □  
 ⊙ ○ ○ □ □  
 ⊙ ○ ○ ○ □ □  
 ⊙ ○ □ □  
 ⊙ ○ □ □

### Approved Sources

- 11A. Milk, eggs, juice, bottled water, hermetically sealed food, game animals
- 11B. Packaged foods, labeling, whole muscle beef
- 11C. Obtaining raw fish, packaged meat & poultry, eggs
- 12A. Food received at proper temperature
- 12B. Shipping and receiving frozen food
- 13. Food in good condition, honestly presented, safe, & unadulterated
- 13B. Food package integrity
- 14A. Required records available: shellstock tags, parasite destruction
- 14B. Missing shellstock tags, destruction
- 14C. Parasite destruction- storing raw/partially cooked fish

IN OUT N/O N/A COS REPEAT

○ ○ ○ ○ □ □  
 ○ ○ ○ ⊙ □ □  
 ○ ○ ○ ⊙ □ □  
 ○ ○ ⊙ ○ □ □  
 ○ ○ ○ ⊙ □ □  
 ⊙ ○ □ □  
 ⊙ ○ □ □  
 ○ ○ ○ ⊙ □ □  
 ○ ○ ○ ⊙ □ □  
 ○ ○ ○ ⊙ □ □

### Protection from Contamination

- 15A. Food separated & protected
- 15B. Cleaning equip/utensils/food containers
- 16A. Food-contact surfaces: cleaned & sanitized immersion 171° F and above  
*This item has Notes. See Footnote 2 at end of questionnaire.*
- 16B. Food contact surfaces cleaned and sanitized NMT 194° F, NLT 180° F
- 16C. Mechanical warewashing equipment sanitization food contact surfaces, equip., utensils
- 17. Proper disposition of returned, previously served reconditions, & unsafe food

IN OUT N/O N/A COS REPEAT

⊙ ○ ○ ○ □ □  
 ⊙ ○ ○ ○ □ □  
 ⊙ ○ ○ ○ □ □  
 ○ ○ ○ ○ □ □  
 ○ ○ ⊙ □ □  
 ○ ○ □ □

### Time/Temperature Control for Safety Food (TCS Food)

- 18A. Proper cooking time & temperatures
- 18B. Whole meat cooking and serving, storing

IN OUT N/O N/A COS REPEAT

○ ○ ○ ⊙ □ □  
 ○ ○ ○ ⊙ □ □

Inspector \_\_\_\_\_

Acknowledged Receipt : \_\_\_\_\_

Page 2 of 7

## Food Establishment Inspection Report - FDA

### Time/Temperature Control for Safety Food (TCS Food)

	IN	OUT	N/O	N/A	COS	REPEAT
18C. Microwave cooking of raw animal foods	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
19. Proper reheating procedures for hot holding	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
20. Proper cooling time & temperatures	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
21. Proper hot holding temperatures	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

**This item has Notes. See Footnote 3 at end of questionnaire.**

**Fail Notes** 3-501.16 (A) *\*Hot TCS foods Maintained at or Above 135oF, Also for whole meat roasts (130F and above)  
[The temperature of the food in the hot holding unit was 123 degrees F. Maintaining food at a temperature of 135 degrees F or greater during hot holding is sufficient to prevent the growth of pathogens and is therefore an effective measure in the prevention of foodborne illness.]*

22. Proper cold holding temperatures	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
23. Proper Date Marking	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
23B. TCS Foods Disposition	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
24A. Time as a public health control: procedures	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
24B. Time as a public health control: temperatures & discarding food	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
24C. Time as a public health control: highly susceptible population (HSP)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

### Consumer Advisory

	IN	OUT	N/O	N/A	COS	REPEAT
25. Consumer advisory provided for raw or undercooked foods	<input type="radio"/>	<input type="radio"/>		<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

### Highly Susceptible Populations (HSP)

	IN	OUT	N/O	N/A	COS	REPEAT
26A. Pasteurized foods used; prohibited foods not offered	<input checked="" type="radio"/>	<input type="radio"/>		<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
26B. Reservice of foods	<input type="radio"/>	<input type="radio"/>		<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

### Chemical

	IN	OUT	N/O	N/A	COS	REPEAT
27. Food additives: approved and properly used	<input type="radio"/>	<input type="radio"/>		<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
28A. Toxic substances identified, stored and used	<input checked="" type="radio"/>	<input type="radio"/>		<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
28B. Poisonous materials, sanitizers, additives, medicines restriction, separation, storage	<input checked="" type="radio"/>	<input type="radio"/>		<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
28C. Conditions of Use: law	<input checked="" type="radio"/>	<input type="radio"/>		<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

### Conformance with Approved Procedures

	IN	OUT	N/O	N/A	COS	REPEAT
29A. Compliance with variance, specialized process, & HACCP plan	<input type="radio"/>	<input type="radio"/>		<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
29B. Treating juice- HACCP, reduced oxygen packaging w/out variance, conformance with approved procedures	<input type="radio"/>	<input type="radio"/>		<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
29C. When HACCP plan is required	<input type="radio"/>	<input type="radio"/>		<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

### GOOD RETAIL PRACTICES

Good Retail Practices are preventative measures to control the addition of pathogens, chemicals, and physical objects into foods.

IN = In compliance OUT = not in compliance COS - corrected on -site during inspection REPEAT = repeat violation

Inspector \_\_\_\_\_

Acknowledged Receipt : \_\_\_\_\_

Page 3 of 7

## Food Establishment Inspection Report - FDA

### Safe Food and Water

	IN	OUT	N/O	N/A	COS	REPEAT
30. Pasteurized eggs used where required	<input type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>
31A. Water & ice from approved source	<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>
31B. Sampling, alternative water supply	<input type="radio"/>	<input type="radio"/>		<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
31C. Sampling report	<input type="radio"/>	<input type="radio"/>		<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
32. Variance obtained for specialized processing methods	<input type="radio"/>	<input type="radio"/>		<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

### Food Temperature Control

	IN	OUT	N/O	N/A	COS	REPEAT
33A. Proper cooling methods used; adequate equipment for temperature control	<input type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>
33B. Frozen food	<input type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>
34. Plant food properly cooked for hot holding	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
35. Approved thawing methods used	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
36A. Thermometers provided and accurate	<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>
36B. Thermometers function properly	<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>

### Food Identification

	IN	OUT	COS	REPEAT
37A. Food properly labeled; original container	<input type="radio"/>	<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

*Fail Notes*    3-302.12    *Food Storage Containers Identified with Common Name of Food*  
*[The mayonnaise, tomato ketchup and mustard had been removed from their original containers and placed in plastic bottles. Certain foods may be difficult to identify after they are removed from their original packaging. Consumers may be allergic to certain foods or ingredients which may result in severe medical consequences. The mistaken use of an ingredient from unlabelled containers could result in chemical poisoning.]*

37B. Food labels, labeling of ingredients	<input type="radio"/>	<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
---	-----------------------	----------------------------------	--------------------------	--------------------------

***This item has Notes. See Footnote 4 at end of questionnaire.***

*Fail Notes*    3-602.11 (B5)    *\*Labeling of major food allergen*  
*[The sandwiches (cheese; peanut butter and jelly) were not labelled with the list of ingredients. A list of ingredients on a label enables a consumer to make an informed decision about a packaged food product. Therefore it is important that the list of ingredients accurately describe all of the ingredients present in the food. This will also prevent allergic reactions and other adverse medical consequences.]*

### Prevention of Food Contamination

	IN	OUT	COS	REPEAT
38A. Insects, rodents, & animals not present	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
38B. Handling prohibition, controlling pests, prohibiting animals	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
39A. Contamination prevented during food storage	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
39B. Food display; ice used as an exterior coolant prohibited as an ingredient	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
39C. Consumer self-service operations- utensils and monitoring	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
40A. Personal cleanliness- prohibition jewelry	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
40B. Maintenance of fingernails	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

Inspector \_\_\_\_\_

Acknowledged Receipt : \_\_\_\_\_

Page 4 of 7

## Food Establishment Inspection Report - FDA

### Prevention of Food Contamination

	IN	OUT	COS	REPEAT
41. Wiping cloths; properly used and stored	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
42A. Washing Produce - following chemical manufacturers label	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
42B. Washing produce	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
42C. Washing produce- chemicals	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

### Proper Use of Utensils

	IN	OUT	COS	REPEAT
43. In-use utensils; properly stored	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
44. Utensils, equipment & linens; properly stored, dried, and handled	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
45A. Single-use/ single service articles properly stored and used, required	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
45B. Single-use/service articles use limitation, kitchenware and tableware preventing contamination	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
46. Gloves used properly	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

### Utensils, Equipment and Vending

	IN	OUT	COS	REPEAT
47A. Food & non-food contact surfaces cleanable	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
47B. Food contact surfaces /utensils cleanability, molluscan shellfish tanks, consumer self-service	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
47C. Properly designed characteristics: food and non-food contact surfaces, molluscan shellfish tanks	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
48A. Warewashing facilities: installed, maintained, & used; test strips	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
48B. Operational warewashing machines	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
49. Non-food contact surfaces clean	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

### Physical Facilities

	IN	OUT	N/A	COS	REPEAT
50. Hot & cold water available; adequate pressure	<input checked="" type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>
51A. Plumbing installed; proper backflow devices	<input checked="" type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>
51B. Prohibiting a cross-connection, inspection and servicing system	<input type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>
51C. Approved system and cleanable fixtures, service sink	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
52A. Sewage and waste water properly disposed	<input checked="" type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>
52B. Grease traps easily accessible for cleaning	<input type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>
52C. Removing mobile food establishment waste	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
53A. Toilet facilities; properly constructed, supplied, & cleaned	<input checked="" type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>
53B. Toilet tissue availability	<input checked="" type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>
54. Garbage & refuse properly disposed; facilities maintained	<input checked="" type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>
55A. Physical facilities installed, maintained, & clean	<input checked="" type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>
55B. Private homes and living or sleeping quarters, use prohibition	<input checked="" type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>
56. Adequate ventilation & lighting; designated areas used	<input checked="" type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>

Inspector \_\_\_\_\_

Acknowledged Receipt : \_\_\_\_\_

Page 5 of 7

## Food Establishment Inspection Report - FDA

### MASSACHUSETTS ONLY REGULATIONS

Rules and Regulations adopted for use in Massachusetts only.

#### Facilities

	IN	OUT	COS	REPEAT
57A. Catering	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
57B. When plans are reviewed, prerequisite for operations- valid permit	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
57C. Contents of plans and specifications, preoperational inspections	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
58. Mobile Food Operations	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
59. Temporary Food Establishments	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
60. Residential Kitchens	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

#### Procedures

	IN	OUT	COS	REPEAT
61. Anti-choking Procedures	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
62. Tobacco Products: Notice and Sale	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
63. Food Allergy Awareness Requirements	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

Inspector \_\_\_\_\_

Acknowledged Receipt : \_\_\_\_\_

Page 6 of 7

## Food Establishment Inspection Report - FDA

### **Footnote 1**

**Notes:**

Although there is a paper towel dispenser, it is not easily accessible after using the hand wash sink. It is recommended that the paper towel dispenser is relocated near the hand wash sink.

### **Footnote 2**

**Notes:**

There was no water in any of the 3 sinks at time of inspection. The PIC informed me that she normally doesn't fill the sinks until she is ready to wash the dishes as she does not want the water to go cold. Therefore, I could not test the concentration of the sanitizing solution but there are test strips available.

### **Footnote 3**

**Notes:**

The PIC informed me that she has requested that the hot holding unit be repaired or replaced since although it is set to max (180 degrees F) the temperature of the unit does not reach 135 degrees F.

### **Footnote 4**

**Notes:**

The PIC (Janine) informed me that she has put in a request for labels but has yet to receive them.



City of Newton  
Health and Human Services  
Deborah Youngblood, PhD, Commissioner  
1000 Commonwealth Ave Newton, MA 02459  
(617) 796-1420



Public Health  
Prevent, Promote, Protect

Food Establishment Inspection Report - FDA

Insp Date: 11/8/2018  
Business: Burr School  
171 Pine St.

Business ID: 1N2088

Newton, MA 02466

Inspection: 6N000064

Section: 4

Phone: 559-9360

Inspector: 1N11123 Nicola Assan

Reason: 1-Routine

Results: No Follow-up R2

Inspection Summary

Official Order for Correction: Based on an inspection today, the items checked indicate violations of 105 CMR 590.000/ 2013 Federal Food Code. This report, when signed below by the Commissioner of Health / Agent constitutes an order by the Commissioner of Health. Failure to correct violations cited in this report may result in suspension or revocation of the food establishment permit and cessation of food establishment operations. If aggrieved by this order, you have the right to a hearing. The request must be in writing and submitted to the Commissioner of Health at the above address within 10 days of receipt of this order.

Est. Type 1 - Food Svc Establis License/Permit # \_\_\_\_\_ Risk Category 02 Risk Level Observed 02 Low

Foodborne Illness Complaint Investigated (All) ☐ Involving More Than Two Persons ☐

FOODBORNE ILLNESS RISK FACTORS AND PUBLIC HEALTH INTERVENTIONS

Compliance status: IN = in compliance OUT = not in compliance N/O = not observed N/A = not applicable

Marked in appropriate box for COS and/or R. COS = corrected on-site during inspection R = repeat violation

Risk factors are improper practices or procedures identified as the most prevalent contributing factors of foodborne illness or injury. Public Health Interventions are control measures to prevent foodborne illnesses or injury.

Supervision

1. PIC Present, Knowledge and Duties

IN	OUT	N/O	N/A	COS	REPEAT
<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>

2. Certified Food Protection Manager

<input checked="" type="radio"/>	<input type="radio"/>		<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
----------------------------------	-----------------------	--	-----------------------	--------------------------	--------------------------

*This item has Notes. See Footnote 1 at end of questionnaire.*

Employee Health / Responding to Contamination Events

3A. Employee Health: PIC Knowledge, Responsibilities & Reporting

<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>
----------------------------------	-----------------------	--	--	--------------------------	--------------------------

3B. Employee Reporting to PIC

<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>
----------------------------------	-----------------------	--	--	--------------------------	--------------------------

4. Proper Use of Restriction & Exclusion

<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>
----------------------------------	-----------------------	--	--	--------------------------	--------------------------

5. Clean-up of Vomiting and Diarrheal Events

<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>
----------------------------------	-----------------------	--	--	--------------------------	--------------------------

Good Hygienic Practices

6A. Proper eating, tasting, drinking, or tobacco use

<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>
----------------------------------	-----------------------	-----------------------	--	--------------------------	--------------------------

6B. Preventing contamination when tasting

<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>
----------------------------------	-----------------------	-----------------------	--	--------------------------	--------------------------

Inspector

Acknowledged Receipt : Tim Viveiros

Page 1 of 7

## Food Establishment Inspection Report - FDA

### Good Hygienic Practices

7. No discharge from eyes, nose, and mouth

IN	OUT	N/O	N/A	COS	REPEAT
<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>

### Control of Hands as a Vehicle of Contamination

8A. Hands clean & properly washed

IN	OUT	N/O	N/A	COS	REPEAT
<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>

8B. Where to wash, hand antiseptics

IN	OUT	N/O	N/A	COS	REPEAT
<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>

9. No bare hand contact with RTE food or a pre-approved alternative procedure properly allowed

IN	OUT	N/O	N/A	COS	REPEAT
<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

10A. Adequate handwashing sinks properly supplied and accessible

IN	OUT	N/O	N/A	COS	REPEAT
<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>

10B. Handwashing sinks accesible with proper signage, handwashing aids

IN	OUT	N/O	N/A	COS	REPEAT
<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>

### Approved Sources

11A. Milk, eggs, juice, bottled water, hermetically sealed food, game animals

IN	OUT	N/O	N/A	COS	REPEAT
<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

11B. Packaged foods, labeling, whole muscle beef

IN	OUT	N/O	N/A	COS	REPEAT
<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

11C. Obtaining raw fish, packaged meat & poultry, eggs

IN	OUT	N/O	N/A	COS	REPEAT
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

12A. Food received at proper temperature

IN	OUT	N/O	N/A	COS	REPEAT
<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

12B. Shipping and receiving frozen food

IN	OUT	N/O	N/A	COS	REPEAT
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

13. Food in good condition, honestly presented, safe, & unadulterated

IN	OUT	N/O	N/A	COS	REPEAT
<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>

13B. Food package integrity

IN	OUT	N/O	N/A	COS	REPEAT
<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>

14A. Required records available: shellstock tags, parasite destruction

IN	OUT	N/O	N/A	COS	REPEAT
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

14B. Missing shellstock tags, destruction

IN	OUT	N/O	N/A	COS	REPEAT
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

14C. Parasite destruction- storing raw/partially cooked fish

IN	OUT	N/O	N/A	COS	REPEAT
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

### Protection from Contamination

15A. Food separated & protected

IN	OUT	N/O	N/A	COS	REPEAT
<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

15B. Cleaning equip/utensils/food containers

IN	OUT	N/O	N/A	COS	REPEAT
<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

16A. Food-contact surfaces: cleaned & sanitized immersion 171° F and above

IN	OUT	N/O	N/A	COS	REPEAT
<input checked="" type="radio"/>	<input type="radio"/>		<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

16B. Food contact surfaces cleaned and sanitized NMT 194° F, NLT 180° F

IN	OUT	N/O	N/A	COS	REPEAT
<input checked="" type="radio"/>	<input type="radio"/>		<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

16C. Mechanical warewashing equipment sanitization food contact surfaces, equip., utensils

IN	OUT	N/O	N/A	COS	REPEAT
<input type="radio"/>	<input type="radio"/>		<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

17. Proper disposition of returned, previously served reconditions, & unsafe food

IN	OUT	N/O	N/A	COS	REPEAT
<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>

### Time/Temperature Control for Safety Food (TCS Food)

18A. Proper cooking time & temperatures

IN	OUT	N/O	N/A	COS	REPEAT
<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

18B. Whole meat cooking and serving, storing

IN	OUT	N/O	N/A	COS	REPEAT
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

18C. Microwave cooking of raw animal foods

IN	OUT	N/O	N/A	COS	REPEAT
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

19. Proper reheating procedures for hot holding

IN	OUT	N/O	N/A	COS	REPEAT
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

20. Proper cooling time & temperatures

IN	OUT	N/O	N/A	COS	REPEAT
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

21. Proper hot holding temperatures

IN	OUT	N/O	N/A	COS	REPEAT
<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

Inspector

Acknowledged Receipt : Tim Viveiros

Page 2 of 7

## Food Establishment Inspection Report - FDA

Time/Temperature Control for Safety Food (TCS Food)

IN OUT N/O N/A COS REPEAT

Fail Notes 3-501.16 (A) *\*Hot TCS foods Maintained at or Above 135oF, Also for whole meat roasts (130F and above)  
[The temperature of the grilled cheese sandwiches in the hot holding unit was 94.6 deg F. Except during preparation, cooking or cooling, or when time is used as the public health control, TCS (time/temperature control for safety food) food shall be maintained at 135 deg F or above.]*

22. Proper cold holding temperatures

☐ ☒ ☐ ☐ ☐ ☐

Fail Notes 3-501.16(A2 &B) *\*Cold PHFs Maintained at or Below 41oF- also pertains to untreated eggs (45F)  
[The temperature of the food (cold meat salad sandwiches) in the refrigerator was 52.7 deg F (the thermometer in the refrigerator was reading 54 deg F). Maintain the temperature of TCS foods at 41 deg F and below.]*

23. Proper Date Marking

☒ ☐ ☐ ☐ ☐ ☐

23B. TCS Foods Disposition

☒ ☐ ☐ ☐ ☐ ☐

24A. Time as a public health control: procedures

☐ ☐ ☐ ☒ ☐ ☐

24B. Time as a public health control: temperatures & discarding food

☐ ☐ ☐ ☒ ☐ ☐

24C. Time as a public health control: highly susceptible population (HSP)

☐ ☐ ☐ ☒ ☐ ☐

Consumer Advisory

IN OUT N/O N/A COS REPEAT

25. Consumer advisory provided for raw or undercooked foods

☐ ☐ ☐ ☒ ☐ ☐

Highly Susceptible Populations (HSP)

IN OUT N/O N/A COS REPEAT

26A. Pasteurized foods used; prohibited foods not offered

☐ ☐ ☐ ☒ ☐ ☐

26B. Reservice of foods

☐ ☐ ☐ ☒ ☐ ☐

Chemical

IN OUT N/O N/A COS REPEAT

27. Food additives: approved and properly used

☐ ☐ ☐ ☒ ☐ ☐

28A. Toxic substances identified, stored and used

☒ ☐ ☐ ☐ ☐ ☐

28B. Poisonous materials, sanitizers, additives, medicines restriction, separation, storage

☒ ☐ ☐ ☐ ☐ ☐

28C. Conditions of Use: law

☒ ☐ ☐ ☐ ☐ ☐

Conformance with Approved Procedures

IN OUT N/O N/A COS REPEAT

29A. Compliance with variance, specialized process, & HACCP plan

☐ ☐ ☐ ☒ ☐ ☐

29B. Treating juice- HACCP, reduced oxygen packaging w/out variance, conformance with approved procedures

☐ ☐ ☐ ☒ ☐ ☐

29C. When HACCP plan is required

☐ ☐ ☐ ☒ ☐ ☐

GOOD RETAIL PRACTICES

Good Retail Practices are preventative measures to control the addition of pathogens, chemicals, and physical objects into foods.

IN = In compliance OUT = not in compliance COS - corrected on -site during inspection REPEAT = repeat violation

*Asson*

Inspector

Acknowledged Receipt : Tim Viveiros

Page 3 of 7

## Food Establishment Inspection Report - FDA

### Safe Food and Water

	IN	OUT	N/O	N/A	COS	REPEAT
30. Pasteurized eggs used where required	<input type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>
31A. Water & ice from approved source	<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>
31B. Sampling, alternative water supply	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>
31C. Sampling report	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>
32. Variance obtained for specialized processing methods	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>

### Food Temperature Control

	IN	OUT	N/O	N/A	COS	REPEAT
33A. Proper cooling methods used; adequate equipment for temperature control	<input type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>
33B. Frozen food	<input type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>
34. Plant food properly cooked for hot holding	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
35. Approved thawing methods used	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
36A. Thermometers provided and accurate	<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>
36B. Thermometers function properly	<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>

### Food Identification

	IN	OUT	COS	REPEAT
37A. Food properly labeled; original container	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
37B. Food labels, labeling of ingredients	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

### Prevention of Food Contamination

	IN	OUT	COS	REPEAT
38A. Insects, rodents, & animals not present	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
38B. Handling prohibition, controlling pests, prohibiting animals	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
39A. Contamination prevented during food storage	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
39B. Food display; ice used as an exterior coolant prohibited as an ingredient	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
39C. Consumer self-service operations- utensils and monitoring	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
40A. Personal cleanliness- prohibition jewelry	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
40B. Maintenance of fingernails	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
41. Wiping cloths; properly used and stored	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
42A. Washing Produce - following chemical manufacturers label	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
42B. Washing produce	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
42C. Washing produce- chemicals	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

### Proper Use of Utensils

	IN	OUT	COS	REPEAT
43. In-use utensils; properly stored	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
44. Utensils, equipment & linens; properly stored, dried, and handled	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
45A. Single-use/ single service articles properly stored and used, required	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
45B. Single-use/service articles use limitation, kitchenware and tableware preventing contamination	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

*Asson*

Inspector

Acknowledged Receipt : Tim Viveiros

Page 4 of 7

## Food Establishment Inspection Report - FDA

### Proper Use of Utensils

46. Gloves used properly

IN	OUT	COS	REPEAT
<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

### Utensils, Equipment and Vending

47A. Food & non-food contact surfaces cleanable

<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
----------------------------------	-----------------------	--------------------------	--------------------------

47B. Food contact surfaces /utensils cleanability, molluscan shellfish tanks, consumer self-service

<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
----------------------------------	-----------------------	--------------------------	--------------------------

47C. Properly designed characteristics: food and non-food contact surfaces, molluscan shellfish tanks

<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
----------------------------------	-----------------------	--------------------------	--------------------------

48A. Warewashing facilities: installed, maintained, & used; test strips

<input type="radio"/>	<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
-----------------------	----------------------------------	--------------------------	--------------------------

*Fail Notes*    4-501.19    *Manual warewashing equipment, wash solution temperature [The temperature of the wash solution was 96.7 deg F. The temperature of the wash solution in MANUAL WAREWASHING EQUIPMENT shall be maintained at not less than 110 deg F or the temperature specified on the cleaning agent manufacturer's label instructions.]*

48B. Operational warewashing machines

<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
----------------------------------	-----------------------	--------------------------	--------------------------

49. Non-food contact surfaces clean

<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
----------------------------------	-----------------------	--------------------------	--------------------------

### Physical Facilities

50. Hot & cold water available; adequate pressure

IN	OUT	N/A	COS	REPEAT
<input checked="" type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>

51A. Plumbing installed; proper backflow devices

<input checked="" type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>
----------------------------------	-----------------------	--	--------------------------	--------------------------

51B. Prohibiting a cross-connection, inspection and servicing system

<input checked="" type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>
----------------------------------	-----------------------	--	--------------------------	--------------------------

51C. Approved system and cleanable fixtures, service sink

<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
-----------------------	-----------------------	-----------------------	--------------------------	--------------------------

52A. Sewage and waste water properly disposed

<input checked="" type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>
----------------------------------	-----------------------	--	--------------------------	--------------------------

52B. Grease traps easily accessible for cleaning

<input checked="" type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>
----------------------------------	-----------------------	--	--------------------------	--------------------------

52C. Removing mobile food establishment waste

<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
-----------------------	-----------------------	----------------------------------	--------------------------	--------------------------

53A. Toilet facilities; properly constructed, supplied, & cleaned

<input checked="" type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>
----------------------------------	-----------------------	--	--------------------------	--------------------------

53B. Toilet tissue availability

<input checked="" type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>
----------------------------------	-----------------------	--	--------------------------	--------------------------

54. Garbage & refuse properly disposed; facilities maintained

<input checked="" type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>
----------------------------------	-----------------------	--	--------------------------	--------------------------

55A. Physical facilities installed, maintained, & clean

<input checked="" type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>
----------------------------------	-----------------------	--	--------------------------	--------------------------

55B. Private homes and living or sleeping quarters, use prohibition

<input checked="" type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>
----------------------------------	-----------------------	--	--------------------------	--------------------------

56. Adequate ventilation & lighting; designated areas used

<input checked="" type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>
----------------------------------	-----------------------	--	--------------------------	--------------------------

### MASSACHUSETTS ONLY REGULATIONS

Rules and Regulations adopted for use in Massachusetts only.

### Facilities

57A. Catering

<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
-----------------------	-----------------------	--------------------------	--------------------------

57B. When plans are reviewed, prerequisite for operations- valid permit

<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
-----------------------	-----------------------	--------------------------	--------------------------

57C. Contents of plans and specifications, preoperational inspections

<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
-----------------------	-----------------------	--------------------------	--------------------------

58. Mobile Food Operations

<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
-----------------------	-----------------------	--------------------------	--------------------------

Inspector

Acknowledged Receipt : Tim Viveiros

Page 5 of 7

## Food Establishment Inspection Report - FDA

### Facilities

59. Temporary Food Establishments

60. Residential Kitchens

IN OUT COS REPEAT

☐ ☐ ☐ ☐

☐ ☐ ☐ ☐

### Procedures

61. Anti-choking Procedures

62. Tobacco Products: Notice and Sale

63. Food Allergy Awareness Requirements

IN OUT COS REPEAT

☐ ☐ ☐ ☐

☐ ☐ ☐ ☐

☐ ☐ ☐ ☐



Inspector

Acknowledged Receipt : Tim Viveiros

Page 6 of 7

## Food Establishment Inspection Report - FDA

### Footnote 1

#### Notes:

PIC will be attending a serve safe training course on 12th November 2018 along with other school kitchen staff.



Inspector

Acknowledged Receipt : Tim Viveiros

Page 7 of 7



City of Newton  
Health and Human Services  
Deborah Youngblood, PhD, Commissioner  
1000 Commonwealth Ave Newton, MA 02459  
(617) 796-1420



Public Health  
Prevent, Promote, Protect.

Food Establishment Inspection Report - FDA

Insp Date: 5/7/2019  
Business: Burr School  
171 Pine St.

Business ID: 1N2088

Newton, MA 02466

Inspection: 6N000117  
Section: 4  
Phone: 559-9360  
Inspector: 1N11123 Nicola Assan  
Reason: 1-Routine  
Results: No Follow-up R2

Inspection Summary

Official Order for Correction: Based on an inspection today, the items checked indicate violations of 105 CMR 590.000/ 2013 Federal Food Code. This report, when signed below by the Commissioner of Health / Agent constitutes an order by the Commissioner of Health. Failure to correct violations cited in this report may result in suspension or revocation of the food establishment permit and cessation of food establishment operations. If aggrieved by this order, you have the right to a hearing. The request must be in writing and submitted to the Commissioner of Health at the above address within 10 days of receipt of this order.

Est. Type 1 - Food Svc Establis License/Permit # \_\_\_\_\_ Risk Category 02 Risk Level Observed 02 Low

Foodborne Illness Complaint Investigated (All) ☐ Involving More Than Two Persons ☐

FOODBORNE ILLNESS RISK FACTORS AND PUBLIC HEALTH INTERVENTIONS

Compliance status: IN = in compliance OUT = not in compliance N/O = not observed N/A = not applicable

Marked in appropriate box for COS and/or R. COS = corrected on-site during inspection R = repeat violation

Risk factors are improper practices or procedures identified as the most prevalent contributing factors of foodborne illness or injury. Public Health Interventions are control measures to prevent foodborne illnesses or injury.

Supervision

- 1. PIC Present, Knowledge and Duties
- 2. Certified Food Protection Manager

IN	OUT	N/O	N/A	COS	REPEAT
<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>
<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>

Employee Health / Responding to Contamination Events

- 3A. Employee Health: PIC Knowledge, Responsibilities & Reporting
- 3B. Employee Reporting to PIC
- 4. Proper Use of Restriction & Exclusion
- 5. Clean-up of Vomiting and Diarrheal Events

IN	OUT	N/O	N/A	COS	REPEAT
<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>
<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>
<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>
<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>

Good Hygienic Practices

- 6A. Proper eating, tasting, drinking, or tobacco use
- 6B. Preventing contamination when tasting

IN	OUT	N/O	N/A	COS	REPEAT
<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>
<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>

Assan

Inspector

Acknowledged Receipt : Tim Viveiros

Page 1 of 6

## Food Establishment Inspection Report - FDA

### Good Hygienic Practices

7. No discharge from eyes, nose, and mouth

IN	OUT	N/O	N/A	COS	REPEAT
<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>

### Control of Hands as a Vehicle of Contamination

8A. Hands clean & properly washed

IN	OUT	N/O	N/A	COS	REPEAT
<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>

8B. Where to wash, hand antiseptics

IN	OUT	N/O	N/A	COS	REPEAT
<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>

9. No bare hand contact with RTE food or a pre-approved alternative procedure properly allowed

IN	OUT	N/O	N/A	COS	REPEAT
<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

10A. Adequate handwashing sinks properly supplied and accessible

IN	OUT	N/O	N/A	COS	REPEAT
<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>

10B. Handwashing sinks accesible with proper signage, handwashing aids

IN	OUT	N/O	N/A	COS	REPEAT
<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>

### Approved Sources

11A. Milk, eggs, juice, bottled water, hermetically sealed food, game animals

IN	OUT	N/O	N/A	COS	REPEAT
<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

11B. Packaged foods, labeling, whole muscle beef

IN	OUT	N/O	N/A	COS	REPEAT
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

11C. Obtaining raw fish, packaged meat & poultry, eggs

IN	OUT	N/O	N/A	COS	REPEAT
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

12A. Food received at proper temperature

IN	OUT	N/O	N/A	COS	REPEAT
<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

12B. Shipping and receiving frozen food

IN	OUT	N/O	N/A	COS	REPEAT
<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

13. Food in good condition, honestly presented, safe, & unadulterated

IN	OUT	N/O	N/A	COS	REPEAT
<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>

13B. Food package integrity

IN	OUT	N/O	N/A	COS	REPEAT
<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>

14A. Required records available: shellstock tags, parasite destruction

IN	OUT	N/O	N/A	COS	REPEAT
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

14B. Missing shellstock tags, destruction

IN	OUT	N/O	N/A	COS	REPEAT
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

14C. Parasite destruction- storing raw/partially cooked fish

IN	OUT	N/O	N/A	COS	REPEAT
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

### Protection from Contamination

15A. Food separated & protected

IN	OUT	N/O	N/A	COS	REPEAT
<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

15B. Cleaning equip/utensils/food containers

IN	OUT	N/O	N/A	COS	REPEAT
<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

16A. Food-contact surfaces: cleaned & sanitized immersion 171° F and above

IN	OUT	N/O	N/A	COS	REPEAT
<input checked="" type="radio"/>	<input type="radio"/>		<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

16B. Food contact surfaces cleaned and sanitized NMT 194° F, NLT 180° F

IN	OUT	N/O	N/A	COS	REPEAT
<input checked="" type="radio"/>	<input type="radio"/>		<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

16C. Mechanical warewashing equipment sanitization food contact surfaces, equip., utensils

IN	OUT	N/O	N/A	COS	REPEAT
<input checked="" type="radio"/>	<input type="radio"/>		<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

17. Proper disposition of returned, previously served reconditions, & unsafe food

IN	OUT	N/O	N/A	COS	REPEAT
<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>

### Time/Temperature Control for Safety Food (TCS Food)

18A. Proper cooking time & temperatures

IN	OUT	N/O	N/A	COS	REPEAT
<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

18B. Whole meat cooking and serving, storing

IN	OUT	N/O	N/A	COS	REPEAT
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

18C. Microwave cooking of raw animal foods

IN	OUT	N/O	N/A	COS	REPEAT
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

19. Proper reheating procedures for hot holding

IN	OUT	N/O	N/A	COS	REPEAT
<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

20. Proper cooling time & temperatures

IN	OUT	N/O	N/A	COS	REPEAT
<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

21. Proper hot holding temperatures

IN	OUT	N/O	N/A	COS	REPEAT
<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

**This item has Notes. See Footnote 1 at end of questionnaire.**

*Assan*

Inspector

Acknowledged Receipt : Tim Viveiros

Page 2 of 6

## Food Establishment Inspection Report - FDA

Time/Temperature Control for Safety Food (TCS Food)

IN OUT N/O N/A COS REPEAT

Fail Notes 3-501.16 (A) *\*Hot TCS foods Maintained at or Above 135oF, Also for whole meat roasts (130F and above)  
[The temperature of the chicken nuggets in the hot holding unit was observed to be 127.4 degrees F. Except during preparation, cooking or cooling, or when time is used as the public health control, TCS (time/temperature control for safety) food shall be maintained at 135 degrees F.]*

- |   |                                  |                       |                       |                                  |                          |                          |
|---|----------------------------------|-----------------------|-----------------------|----------------------------------|--------------------------|--------------------------|
| 22. Proper cold holding temperatures                                      | <input checked="" type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/>            | <input type="checkbox"/> | <input type="checkbox"/> |
| 23. Proper Date Marking   | <input checked="" type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/>            | <input type="checkbox"/> | <input type="checkbox"/> |
| 23B. TCS Foods Disposition  | <input checked="" type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/>            | <input type="checkbox"/> | <input type="checkbox"/> |
| 24A. Time as a public health control: procedures                          | <input type="radio"/>            | <input type="radio"/> | <input type="radio"/> | <input checked="" type="radio"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 24B. Time as a public health control: temperatures & discarding food      | <input type="radio"/>            | <input type="radio"/> | <input type="radio"/> | <input checked="" type="radio"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 24C. Time as a public health control: highly susceptible population (HSP) | <input type="radio"/>            | <input type="radio"/> | <input type="radio"/> | <input checked="" type="radio"/> | <input type="checkbox"/> | <input type="checkbox"/> |

Consumer Advisory

IN OUT N/O N/A COS REPEAT

25. Consumer advisory provided for raw or undercooked foods

☐ ☐ ☐ ☒ ☐ ☐

Highly Susceptible Populations (HSP)

IN OUT N/O N/A COS REPEAT

- 26A. Pasteurized foods used; prohibited foods not offered

☐ ☐ ☐ ☒ ☐ ☐

- 26B. Reservice of foods

☐ ☐ ☐ ☒ ☐ ☐

Chemical

IN OUT N/O N/A COS REPEAT

27. Food additives: approved and properly used

☐ ☐ ☐ ☒ ☐ ☐

- 28A. Toxic substances identified, stored and used

☒ ☐ ☐ ☐ ☐ ☐

- 28B. Poisonous materials, sanitizers, additives, medicines restriction, separation, storage

☒ ☐ ☐ ☐ ☐ ☐

- 28C. Conditions of Use: law

☒ ☐ ☐ ☐ ☐ ☐

Conformance with Approved Procedures

IN OUT N/O N/A COS REPEAT

- 29A. Compliance with variance, specialized process, & HACCP plan

☐ ☐ ☐ ☒ ☐ ☐

- 29B. Treating juice- HACCP, reduced oxygen packaging w/out variance, conformance with approved procedures

☐ ☐ ☐ ☒ ☐ ☐

- 29C. When HACCP plan is required

☐ ☐ ☐ ☒ ☐ ☐

GOOD RETAIL PRACTICES

Good Retail Practices are preventative measures to control the addition of pathogens, chemicals, and physical objects into foods.

IN = In compliance OUT = not in compliance COS - corrected on -site during inspection REPEAT = repeat violation

Safe Food and Water

IN OUT N/O N/A COS REPEAT

30. Pasteurized eggs used where required

☐ ☐ ☐ ☐ ☐ ☐

- 31A. Water & ice from approved source

☒ ☐ ☐ ☐ ☐ ☐

*Assan*

Inspector

Acknowledged Receipt : Tim Viveiros

Page 3 of 6

## Food Establishment Inspection Report - FDA

Safe Food and Water	IN	OUT	N/O	N/A	COS	REPEAT
31B. Sampling, alternative water supply	<input type="radio"/>	<input type="radio"/>		<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
31C. Sampling report	<input type="radio"/>	<input type="radio"/>		<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
32. Variance obtained for specialized processing methods	<input type="radio"/>	<input type="radio"/>		<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
Food Temperature Control	IN	OUT	N/O	N/A	COS	REPEAT
33A. Proper cooling methods used; adequate equipment for temperature control	<input type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>
33B. Frozen food	<input type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>
34. Plant food properly cooked for hot holding	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
35. Approved thawing methods used	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
36A. Thermometers provided and accurate	<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>
36B. Thermometers function properly	<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>
Food Identification	IN	OUT	COS	REPEAT		
37A. Food properly labeled; original container		<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>	
37B. Food labels, labeling of ingredients		<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Prevention of Food Contamination	IN	OUT	COS	REPEAT		
38A. Insects, rodents, & animals not present		<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>	
38B. Handling prohibition, controlling pests, prohibiting animals		<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>	
39A. Contamination prevented during food storage		<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>	
39B. Food display; ice used as an exterior coolant prohibited as an ingredient		<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>	
39C. Consumer self-service operations- utensils and monitoring		<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>	
40A. Personal cleanliness- prohibition jewelry		<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>	
40B. Maintenance of fingernails		<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>	
41. Wiping cloths; properly used and stored		<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>	
42A. Washing Produce - following chemical manufacturers label		<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>	
42B. Washing produce		<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>	
42C. Washing produce- chemicals		<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Proper Use of Utensils	IN	OUT	COS	REPEAT		
43. In-use utensils; properly stored		<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>	
44. Utensils, equipment & linens; properly stored, dried, and handled		<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>	
45A. Single-use/ single service articles properly stored and used, required		<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>	
45B. Single-use/service articles use limitation, kitchenware and tableware preventing contamination		<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>	
46. Gloves used properly		<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Utensils, Equipment and Vending	IN	OUT	COS	REPEAT		
47A. Food & non-food contact surfaces cleanable		<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>	

*Asson*

Inspector

Acknowledged Receipt : Tim Viveiros

Page 4 of 6

## Food Establishment Inspection Report - FDA

Utensils, Equipment and Vending	IN	OUT	COS	REPEAT
47B. Food contact surfaces /utensils cleanability, molluscan shellfish tanks, consumer self-service	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
47C. Properly designed characteristics: food and non-food contact surfaces, molluscan shellfish tanks	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
48A. Warewashing facilities: installed, maintained, & used; test strips	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
48B. Operational warewashing machines	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
49. Non-food contact surfaces clean	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

Physical Facilities	IN	OUT	N/A	COS	REPEAT
50. Hot & cold water available; adequate pressure	<input checked="" type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>
51A. Plumbing installed; proper backflow devices	<input checked="" type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>
51B. Prohibiting a cross-connection, inspection and servicing system	<input checked="" type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>
51C. Approved system and cleanable fixtures, service sink	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
52A. Sewage and waste water properly disposed	<input checked="" type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>
52B. Grease traps easily accessible for cleaning	<input checked="" type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>
52C. Removing mobile food establishment waste	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
53A. Toilet facilities; properly constructed, supplied, & cleaned	<input checked="" type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>
53B. Toilet tissue availability	<input checked="" type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>
54. Garbage & refuse properly disposed; facilities maintained	<input checked="" type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>
55A. Physical facilities installed, maintained, & clean	<input checked="" type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>
55B. Private homes and living or sleeping quarters, use prohibition	<input checked="" type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>
56. Adequate ventilation & lighting; designated areas used	<input checked="" type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>

### MASSACHUSETTS ONLY REGULATIONS

Rules and Regulations adopted for use in Massachusetts only.

Facilities	IN	OUT	COS	REPEAT
57A. Catering	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
57B. When plans are reviewed, prerequisite for operations- valid permit	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
57C. Contents of plans and specifications, preoperational inspections	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
58. Mobile Food Operations	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
59. Temporary Food Establishments	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
60. Residential Kitchens	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
Procedures	IN	OUT	COS	REPEAT
61. Anti-choking Procedures	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
62. Tobacco Products: Notice and Sale	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
63. Food Allergy Awareness Requirements	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

*Asson*

Inspector

Acknowledged Receipt : Tim Viveiros

Page 5 of 6

## Food Establishment Inspection Report - FDA

### Footnote 1

#### Notes:

The PIC records the temperature of the food in the hot holding unit daily. However, the time is recorded at 8.30 and two of the temperatures were recorded as 35 degrees celsius (requirement is >57.2 degrees celsius or 135 degrees F).

Please ensure that the time is recorded correctly and appropriately. For example, the temperature can be taken before food is placed in the unit and at half hour intervals after the food has been placed in the unit.

Assan

Inspector

Acknowledged Receipt : Tim Viveiros

Page 6 of 6



City of Newton  
Health and Human Services  
Deborah Youngblood, PhD, Commissioner  
1000 Commonwealth Ave Newton, MA 02459  
(617) 796-1420



**Public Health**  
Prevent, Promote, Protect.

Food Establishment Inspection Report - FDA

**Insp Date:** 10/21/2016  
**Business:** Cabot School  
229 Cabot St.

**Business ID:** 1N2092

Newton, MA 02460

**Inspection:** 5N000244

**Section:** 1

**Phone:** 617-559-9400

**Inspector:** 1N81219 Kyle Simpson

**Reason:** 1-Routine

**Results:** No Follow-up

Inspection Summary

Official Order for Correction: Based on an inspection today, the items checked indicate violations of 105 CMR 590.000/ 2009 Federal Food Code. This report, when signed below by the Commissioner of Health / Agent constitutes an order by the Commissioner of Health. Failure to correct violations cited in this report may result in suspension or revocation of the food establishment permit and cessation of food establishment operations. If aggrieved by this order, you have the right to a hearing. The request must be in writing and submitted to the Commissioner of Health at the above address within 10 days of receipt of this order.

Est. Type 1 - Food Svc Establis License/Permit # \_\_\_\_\_ Risk Category 02 Risk Level Observed 02 Low

FOODBORNE ILLNESS RISK FACTORS AND PUBLIC HEALTH INTERVENTIONS

Compliance status: IN = in compliance OUT = not in compliance N/O = not observed N/A = not applicable

Marked in appropriate box for COS and/or R. COS = corrected on-site during inspection R = repeat violation

Risk factors are improper practices or procedures identified as the most prevalent contributing factors of foodborne illness or injury. Public Health Interventions are control measures to prevent foodborne illnesses or injury.

Supervision

1A. PIC Present

B. Cert. food manager, knowledge, no critical violations

C. Duties of PIC

IN OUT N/O N/A COS REPEAT

☒ ☐ ☐ ☐ ☐ ☐

☒ ☐ ☐ ☐ ☐ ☐

☒ ☐ ☐ ☐ ☐ ☐

Employee Health

2. Management, food employee and conditional employee; knowledge, responsibilities and reporting

3. Proper use of restriction and exclusion

IN OUT N/O N/A COS REPEAT

☒ ☐ ☐ ☐ ☐ ☐

☒ ☐ ☐ ☐ ☐ ☐

Good Hygienic Practices

4A. Proper eating, tasting, drinking, or tobacco use

B. Preventing contamination when tasting

5. No discharge from eyes, nose, and mouth

IN OUT N/O N/A COS REPEAT

☒ ☐ ☐ ☐ ☐ ☐

☐ ☐ ☒ ☐ ☐ ☐

☒ ☐ ☐ ☐ ☐ ☐

*Kyle Simpson*

Inspector

Acknowledged Receipt : Kimberly Scaltreto

Page 1 of 4

## Food Establishment Inspection Report - FDA

### Preventing Contamination by Hands

6A. Hands clean & properly washed

IN OUT N/O N/A COS REPEAT  
☒ ☐ ☐ ☐ ☐ ☐

B. Where to wash, hand antiseptics

☒ ☐ ☐ ☐ ☐ ☐

7. No bare hand contact with RTE food or a pre-approved alternative procedure properly allowed

☒ ☐ ☐ ☐ ☐ ☐

8A. Adequate handwashing sinks properly supplied and accessible

☒ ☐ ☐ ☐ ☐ ☐

B. Handwashing sinks accessible with proper signage, handwashing aids

☒ ☐ ☐ ☐ ☐ ☐

C. Conveniently located handwashing sink

☒ ☐ ☐ ☐ ☐ ☐

### Approved Sources

9A. Milk, eggs, juice, bottled water, hermetically sealed food

IN OUT N/O N/A COS REPEAT  
☒ ☐ ☐ ☐ ☐ ☐

B. Fish and shellfish

☐ ☐ ☐ ☒ ☐ ☐

10. Food received at proper temperature

☐ ☐ ☒ ☐ ☐ ☐

11. Food in good condition, safe, & unadulterated

☒ ☐ ☐ ☐ ☐ ☐

### Protection from Contamination

12A. Food separated & protected

IN OUT N/O N/A COS REPEAT  
☒ ☐ ☐ ☐ ☐ ☐

B. Gloves, use limitation, one task- contaminated

☒ ☐ ☐ ☐ ☐ ☐

13A. Food-contact surfaces: cleaned & sanitized 171° F

☒ ☐ ☐ ☐ ☐ ☐

B. Food contact surfaces cleaned and sanitized NMT 194° F, NLT 180° F

☐ ☐ ☐ ☒ ☐ ☐

C. Mechanical warewashing equipment sanitization food contact surfaces, equip., utensils

☒ ☐ ☐ ☐ ☐ ☐

14. Proper disposition of returned, previously served reconditions, & unsafe food

☒ ☐ ☐ ☐ ☐ ☐

### Potentially Hazardous Food Time/Temperature

15. Proper cooking time & temperatures

IN OUT N/O N/A COS REPEAT  
☐ ☐ ☒ ☐ ☐ ☐

16. Proper reheating procedures for hot holding

☒ ☐ ☐ ☐ ☐ ☐

17. Proper cooling time & temperatures

☐ ☐ ☒ ☐ ☐ ☐

18. Proper hot holding temperatures

☒ ☐ ☐ ☐ ☐ ☐

19. Proper cold holding temperatures

☒ ☐ ☐ ☐ ☐ ☐

20. Time as a public health control: procedures & record

☐ ☐ ☐ ☒ ☐ ☐

### Highly Susceptible Populations

21. Pasteurized foods used; prohibited foods not offered

IN OUT N/O N/A COS REPEAT  
☐ ☐ ☐ ☒ ☐ ☐

### Chemical

22. Food additives: approved and properly used

IN OUT N/O N/A COS REPEAT  
☐ ☐ ☐ ☐ ☐ ☐

23A. Toxic substances properly identified, stored and used

☒ ☐ ☐ ☐ ☐ ☐

B. Restriction presence and use, restriction and storage of medicines

☒ ☐ ☐ ☐ ☐ ☐

*Kyle L*

Inspector

Acknowledged Receipt : Kimberly Scaltreto

Page 2 of 4

## Food Establishment Inspection Report - FDA

Chemical

IN OUT N/O N/A COS REPEAT

C. Storage- other personal care items

☒ ☐ ☐ ☐ ☐

### GOOD RETAIL PRACTICES

Good Retail Practices are preventative measures to control the addition of pathogens, chemicals, and physical objects into foods.

IN = In compliance OUT = not in compliance COS - corrected on -site during inspection REPEAT = repeat violation

#### Safe Food and Water

IN OUT N/O N/A COS REPEAT

24. Water & ice from approved source

☒ ☐ ☐ ☐ ☐ ☐

#### Food Temperature Control

IN OUT N/O N/A COS REPEAT

25A. Proper cooling methods used; adequate equipment for temperature control

☒ ☐ ☐ ☐ ☐ ☐

B. Frozen food

☐ ☐ ☐ ☒ ☐ ☐

26. Plant food properly cooked for hot holding

☒ ☐ ☐ ☐ ☐ ☐

27. Approved thawing methods used

☐ ☐ ☒ ☐ ☐ ☐

28A. Thermometers provided and accurate

☒ ☐ ☐ ☐ ☐ ☐

B. Thermometers function properly

☒ ☐ ☐ ☐ ☐ ☐

#### Food Identification

IN OUT COS REPEAT

29A. Food properly labeled; original container

☒ ☐ ☐ ☐

B. Food labels, labeling of ingredients

☒ ☐ ☐ ☐

#### Prevention of Food Contamination

IN OUT COS REPEAT

30A. Insects, rodents, & animals not present

☒ ☐ ☐ ☐

B. Handling prohibition, controlling pests, prohibiting animals

☒ ☐ ☐ ☐

31A. Contamination prevented during food storage

☒ ☐ ☐ ☐

B. Food display; ice used as an exterior coolant prohibited as an ingredient

☒ ☐ ☐ ☐

C. Consumer self-service operations- utensils and monitoring

☒ ☐ ☐ ☐

32A. Personal cleanliness- prohibition jewelry

☒ ☐ ☐ ☐

B. Maintenance of fingernails

☒ ☐ ☐ ☐

33. Wiping cloths; properly used and stored

☒ ☐ ☐ ☐

34. Washing fruits & vegetables

☒ ☐ ☐ ☐

#### Proper Use of Utensils

IN OUT COS REPEAT

35. In-use utensils; properly stored

☒ ☐ ☐ ☐

36. Utensils, equipment & linens; properly stored, dried, and handled

☒ ☐ ☐ ☐

37A. Single-use/ single service articles properly stored and used, required

☒ ☐ ☐ ☐

B. Single-use/service articles use limitation, kitchenware and tableware preventing contamination

☒ ☐ ☐ ☐

38. Gloves used properly

☒ ☐ ☐ ☐

*Kyle L*

Inspector

Acknowledged Receipt : Kimberly Scaltreto

Page 3 of 4

## Food Establishment Inspection Report - FDA

### Utensils, Equipment and Vending

	IN	OUT	COS	REPEAT
39A. Food & non-food contact surfaces cleanable	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
B. Food contact surfaces /utensils cleanability, molluscan shellfish tanks, consumer self-servic	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
C. Properly designed characteristics: food and non-food contact surfaces, molluscan shellfish tanks	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
40A. Warewashing facilities: installed, maintained, & used; test strips	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
B. Operational warewashing machines	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
41. Non-food contact surfaces clean	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

### Physical Facilities

	IN	OUT	N/O	N/A	COS	REPEAT
42. Hot & cold water available; adequate pressure	<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>
43A. Plumbing installed; proper backflow devices	<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>
B. Prohibiting a cross-connection, non-drinking water, system maintained in good repair	<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>
C. Approved system and cleanable fixtures, service sink	<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>
44A. Sewage and waste water properly disposed	<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>
B. Grease traps easily accessible for cleaning	<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>
45A. Toilet facilities; properly constructed, supplied, & cleaned	<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>
B. Toilet tissue availability	<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>
46. Garbage & refuse properly disposed; facilities maintained	<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>
47A. Physical facilities installed, maintained, & clean	<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>
B. Cleaning maintenance tools, preventing contamination	<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>
48. Adequate ventilation & lighting; designated areas used	<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>

### MASSACHUSETTS ONLY REGULATIONS

Rules and Regulations adopted for use in Massachusetts only.

#### Facilities

	IN	OUT	COS	REPEAT
49A. When plans are reviewed, prerequisite for operations- valid permit	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
B. Contents of plans and specifications, preoperational inspections	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

#### Procedures

	IN	OUT	COS	REPEAT
50. Anti-choking Procedures	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
51. Tobacco Products: Notice and Sale	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

*Kyle L*

Inspector

Acknowledged Receipt : Kimberly Scaltreto

Page 4 of 4



**City of Newton**  
**Health and Human Services**  
 Deborah Youngblood, PhD, Commissioner  
 1000 Commonwealth Ave Newton, MA 02459  
 (617) 796-1420



**Public Health**  
 Prevent. Promote. Protect.

**Food Establishment Inspection Report - FDA**

**Insp Date:** 9/9/2019  
**Business:** Cabot School  
 229 Cabot St.

**Business ID:** 1N2092

Newton, MA 02460

**Inspection:** 6N000139  
**Section:** 1  
**Phone:** 617-559-9400  
**Inspector:** 1N11123 Nicola Assan  
**Reason:** 1-Routine  
**Results:** Follow-up R2

**Inspection Summary**

Official Order for Correction: Based on an inspection today, the items checked indicate violations of 105 CMR 590.000/ 2013 Federal Food Code. This report, when signed below by the Commissioner of Health / Agent constitutes an order by the Commissioner of Health. Failure to correct violations cited in this report may result in suspension or revocation of the food establishment permit and cessation of food establishment operations. If aggrieved by this order, you have the right to a hearing. The request must be in writing and submitted to the Commissioner of Health at the above address within 10 days of receipt of this order.

Est. Type 1 - Food Svc Establish License/Permit # \_\_\_\_\_ Risk Category 02 Risk Level Observed 02 Low

Foodborne Illness Complaint Investigated (All) ☐ Involving More Than Two Persons ☐

**FOODBORNE ILLNESS RISK FACTORS AND PUBLIC HEALTH INTERVENTIONS**

Compliance status: IN = in compliance OUT = not in compliance N/O = not observed N/A = not applicable

Marked in appropriate box for COS and/or R. COS = corrected on-site during inspection R = repeat violation

Risk factors are improper practices or procedures identified as the most prevalent contributing factors of foodborne illness or injury. Public Health Interventions are control measures to prevent foodborne illnesses or injury.

**Supervision**

1. PIC Present, Knowledge and Duties

IN	OUT	N/O	N/A	COS	REPEAT
<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>

2. Certified Food Protection Manager

<input checked="" type="radio"/>	<input type="radio"/>		<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
----------------------------------	-----------------------	--	-----------------------	--------------------------	--------------------------

**Employee Health / Responding to Contamination Events**

3A. Employee Health: PIC Knowledge, Responsibilities & Reporting

IN	OUT	N/O	N/A	COS	REPEAT
<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>

3B. Employee Reporting to PIC

<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>
----------------------------------	-----------------------	--	--	--------------------------	--------------------------

4. Proper Use of Restriction & Exclusion

<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>
----------------------------------	-----------------------	--	--	--------------------------	--------------------------

5. Clean-up of Vomiting and Diarrheal Events

<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>
----------------------------------	-----------------------	--	--	--------------------------	--------------------------

**Good Hygienic Practices**

6A. Proper eating, tasting, drinking, or tobacco use

IN	OUT	N/O	N/A	COS	REPEAT
<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>

*Assan*

Inspector

Acknowledged Receipt : Christina Flutie

Page 1 of 7

# Food Establishment Inspection Report - FDA

## Good Hygienic Practices

Fail Notes 2-401.11

*\*Eating, Drinking, or Using Tobacco  
[There was a food employee eating in the kitchen (food preparation area). Food employees shall eat, drink or use any form of tobacco only in designated areas where the contamination of exposed food; clean equipment, utensils, and linens; unwrapped single-service and single-use articles; or other items needing protection can not result.]*

6B. Preventing contamination when tasting

IN OUT N/O N/A COS REPEAT  
⊙ ○ ○ □ □

7. No discharge from eyes, nose, and mouth

⊙ ○ ○ □ □

## Control of Hands as a Vehicle of Contamination

8A. Hands clean & properly washed

⊙ ○ ○ □ □

8B. Where to wash, hand antiseptics

⊙ ○ ○ □ □

9. No bare hand contact with RTE food or a pre-approved alternative procedure properly allowed

⊙ ○ ○ ○ □ □

10A. Adequate handwashing sinks properly supplied and accessible

○ ⊙ □ □

Fail Notes

6-301.11

*Handwashing Cleanser, Availability  
[There was no handwashing cleanser at any of the handwashing sinks in the kitchen. Each handwashing sink or group of 2 adjacent handwashing sinks shall be provided with a supply of hand cleaning liquid, powder or bar soap.]*

6-301.12

*Hand Drying Provision  
[There was no hand drying provision at any of the handwashing sinks in the kitchen. Each handwashing sink or group of adjacent handwashing sinks shall be provided with: a) individual, disposable towels; or b) a continuous towel system that supplies the user with a clean towel; or c) a heated-air hand drying device; or d) a hand drying device that employs an air-knife system that delivers high velocity, pressurized air at ambient temperatures.]*

10B. Handwashing sinks accesible with proper signage, handwashing aids

⊙ ○ □ □

## Approved Sources

11A. Milk, eggs, juice, bottled water, hermetically sealed food, game animals

⊙ ○ ○ ○ □ □

11B. Packaged foods, labeling, whole muscle beef

○ ○ ○ ○ □ □

11C. Obtaining raw fish, packaged meat & poultry, eggs

○ ○ ⊙ ○ □ □

12A. Food received at proper temperature

○ ○ ⊙ ○ □ □

12B. Shipping and receiving frozen food

○ ○ ⊙ ○ □ □

13. Food in good condition, honestly presented, safe, & unadulterated

⊙ ○ □ □

13B. Food package integrity

⊙ ○ □ □

14A. Required records available: shellstock tags, parasite destruction

○ ○ ○ ⊙ □ □

14B. Missing shellstock tags, destruction

○ ○ ○ ⊙ □ □

14C. Parasite destruction- storing raw/partially cooked fish

○ ○ ○ ⊙ □ □

## Protection from Contamination

IN OUT N/O N/A COS REPEAT

*Assen*

Inspector

Acknowledged Receipt : Christina Flutie

Page 2 of 7

## Food Establishment Inspection Report - FDA

### Protection from Contamination

	IN	OUT	N/O	N/A	COS	REPEAT
15A. Food separated & protected	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
15B. Cleaning equip/utensils/food containers	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
16A. Food-contact surfaces: cleaned & sanitized immersion 171° F and above	<input type="radio"/>	<input checked="" type="radio"/>		<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

**Fail Notes** 4-702.11 *\*Frequency of Sanitization of Utensils and Food-Contact Surfaces of Equipment*  
*[Currently, sanitizing solution is being used as a 'cleaner' for surfaces and some equipment that do not regularly get cleaned in the dish machine. Sanitizer is NOT a cleaner. Cleaning is a three (3) step process: Wash, Rinse then Sanitize. A container with soapy water shall be available for proper cleaning. The use of red and green buckets (for sanitizing solution and soapy water respectively) are HIGHLY recommended. Sanitizer does not remove allergens. To remove allergens use a soapy water solution. If a surface needs to be cleaned from crumbs or ingredients (not allergens or raw meats) use a disposable paper towel. Use once and dispose. Review and train staff on proper cleaning procedures.]*

16B. Food contact surfaces cleaned and sanitized NMT 194° F, NLT 180° F	<input type="radio"/>	<input type="radio"/>		<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
<b><i>This item has Notes. See Footnote 1 at end of questionnaire.</i></b>						
16C. Mechanical warewashing equipment sanitization food contact surfaces, equip., utensils	<input type="radio"/>	<input type="radio"/>		<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
17. Proper disposition of returned, previously served reconditions, & unsafe food	<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>

### Time/Temperature Control for Safety Food (TCS Food)

	IN	OUT	N/O	N/A	COS	REPEAT
18A. Proper cooking time & temperatures	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
18B. Whole meat cooking and serving, storing	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
18C. Microwave cooking of raw animal foods	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
19. Proper reheating procedures for hot holding	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
20. Proper cooling time & temperatures	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
21. Proper hot holding temperatures	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
22. Proper cold holding temperatures	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
23. Proper Date Marking	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
23B. TCS Foods Disposition	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
24A. Time as a public health control: procedures	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
24B. Time as a public health control: temperatures & discarding food	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
24C. Time as a public health control: highly susceptible population (HSP)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

### Consumer Advisory

	IN	OUT	N/O	N/A	COS	REPEAT
25. Consumer advisory provided for raw or undercooked foods	<input type="radio"/>	<input type="radio"/>		<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

### Highly Susceptible Populations (HSP)

	IN	OUT	N/O	N/A	COS	REPEAT
26A. Pasteurized foods used; prohibited foods not offered	<input type="radio"/>	<input type="radio"/>		<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

*Assan*

Inspector

Acknowledged Receipt : Christina Flutie

Page 3 of 7

## Food Establishment Inspection Report - FDA

### Highly Susceptible Populations (HSP)

26B. Reserve of foods

IN	OUT	N/O	N/A	COS	REPEAT
<input type="radio"/>	<input type="radio"/>		<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

### Chemical

27. Food additives: approved and properly used

<input type="radio"/>	<input type="radio"/>		<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
-----------------------	-----------------------	--	----------------------------------	--------------------------	--------------------------

28A. Toxic substances identified, stored and used

<input checked="" type="radio"/>	<input type="radio"/>		<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
----------------------------------	-----------------------	--	-----------------------	--------------------------	--------------------------

28B. Poisonous materials, sanitizers, additives, medicines restriction, separation, storage

<input checked="" type="radio"/>	<input type="radio"/>		<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
----------------------------------	-----------------------	--	-----------------------	--------------------------	--------------------------

28C. Conditions of Use: law

<input checked="" type="radio"/>	<input type="radio"/>		<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
----------------------------------	-----------------------	--	-----------------------	--------------------------	--------------------------

### Conformance with Approved Procedures

29A. Compliance with variance, specialized process, & HACCP plan

<input type="radio"/>	<input type="radio"/>		<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
-----------------------	-----------------------	--	----------------------------------	--------------------------	--------------------------

29B. Treating juice- HACCP, reduced oxygen packaging w/out variance, conformance with approved procedures

<input type="radio"/>	<input type="radio"/>		<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
-----------------------	-----------------------	--	----------------------------------	--------------------------	--------------------------

29C. When HACCP plan is required

<input type="radio"/>	<input type="radio"/>		<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
-----------------------	-----------------------	--	----------------------------------	--------------------------	--------------------------

### GOOD RETAIL PRACTICES

Good Retail Practices are preventative measures to control the addition of pathogens, chemicals, and physical objects into foods.

IN = In compliance   OUT = not in compliance   COS - corrected on -site during inspection   REPEAT = repeat violation

### Safe Food and Water

30. Pasteurized eggs used where required

IN	OUT	N/O	N/A	COS	REPEAT
<input type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>

31A. Water & ice from approved source

<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>
----------------------------------	-----------------------	--	--	--------------------------	--------------------------

31B. Sampling, alternative water supply

<input type="radio"/>	<input type="radio"/>		<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
-----------------------	-----------------------	--	----------------------------------	--------------------------	--------------------------

31C. Sampling report

<input type="radio"/>	<input type="radio"/>		<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
-----------------------	-----------------------	--	----------------------------------	--------------------------	--------------------------

32. Variance obtained for specialized processing methods

<input type="radio"/>	<input type="radio"/>		<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
-----------------------	-----------------------	--	----------------------------------	--------------------------	--------------------------

### Food Temperature Control

33A. Proper cooling methods used; adequate equipment for temperature control

<input type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>
-----------------------	-----------------------	--	--	--------------------------	--------------------------

33B. Frozen food

<input type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>
-----------------------	-----------------------	--	--	--------------------------	--------------------------

34. Plant food properly cooked for hot holding

<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
-----------------------	-----------------------	----------------------------------	-----------------------	--------------------------	--------------------------

35. Approved thawing methods used

<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
-----------------------	-----------------------	----------------------------------	-----------------------	--------------------------	--------------------------

36A. Thermometers provided and accurate

<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>
----------------------------------	-----------------------	--	--	--------------------------	--------------------------

36B. Thermometers function properly

<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>
----------------------------------	-----------------------	--	--	--------------------------	--------------------------

### Food Identification

37A. Food properly labeled; original container

IN	OUT	COS	REPEAT
<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

37B. Food labels, labeling of ingredients

<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
----------------------------------	-----------------------	--------------------------	--------------------------

### Prevention of Food Contamination

38A. Insects, rodents, & animals not present

IN	OUT	COS	REPEAT
<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

*Assan*

Inspector

Acknowledged Receipt : Christina Flutie

Page 4 of 7

## Food Establishment Inspection Report - FDA

Prevention of Food Contamination			IN	OUT	COS	REPEAT	
38B.	Handling prohibition, controlling pests, prohibiting animals		<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>	
39A.	Contamination prevented during food storage		<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>	
39B.	Food display; ice used as an exterior coolant prohibited as an ingredient		<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>	
39C.	Consumer self-service operations- utensils and monitoring		<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>	
40A.	Personal cleanliness- prohibition jewelry		<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>	
40B.	Maintenance of fingernails		<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>	
41.	Wiping cloths; properly used and stored		<input type="radio"/>	<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Fail Notes	<div style="border-left: 1px solid black; padding-left: 10px; margin-left: 10px;"> <b>3-304.14 Wiping Cloths, Use Limitation</b>  <i>[Wiping cloths were being stored on the food preparation table. Cloths in-use for wiping counters and other equipment surfaces shall be held between uses in a chemical sanitizer solution at a concentration specified on the manufacturers label.]</i> </div>						
42A.	Washing Produce - following chemical manufacturers label		<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>	
42B.	Washing produce		<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>	
42C.	Washing produce- chemicals		<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Proper Use of Utensils			IN	OUT	COS	REPEAT	
43.	In-use utensils; properly stored		<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>	
44.	Utensils, equipment & linens; properly stored, dried, and handled		<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>	
45A.	Single-use/ single service articles properly stored and used, required		<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>	
45B.	Single-use/service articles use limitation, kitchenware and tableware preventing contamination		<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>	
46.	Gloves used properly		<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Utensils, Equipment and Vending			IN	OUT	COS	REPEAT	
47A.	Food & non-food contact surfaces cleanable		<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>	
47B.	Food contact surfaces /utensils cleanability, molluscan shellfish tanks, consumer self-service		<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>	
47C.	Properly designed characteristics: food and non-food contact surfaces, molluscan shellfish tanks		<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>	
48A.	Warewashing facilities: installed, maintained, & used; test strips		<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>	
	<b><i>This item has Notes. See Footnote 2 at end of questionnaire.</i></b>						
48B.	Operational warewashing machines		<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>	
	<b><i>This item has Notes. See Footnote 3 at end of questionnaire.</i></b>						
49.	Non-food contact surfaces clean		<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Physical Facilities			IN	OUT	N/A	COS	REPEAT
50.	Hot & cold water available; adequate pressure		<input checked="" type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>
51A.	Plumbing installed; proper backflow devices		<input checked="" type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>
51B.	Prohibiting a cross-connection, inspection and servicing system		<input checked="" type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>

*Assen*

Inspector

Acknowledged Receipt : Christina Flutie

Page 5 of 7

## Food Establishment Inspection Report - FDA

### Physical Facilities

	IN	OUT	N/A	COS	REPEAT
51C. Approved system and cleanable fixtures, service sink	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
52A. Sewage and waste water properly disposed	<input checked="" type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>
52B. Grease traps easily accessible for cleaning	<input checked="" type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>
52C. Removing mobile food establishment waste	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
53A. Toilet facilities; properly constructed, supplied, & cleaned	<input checked="" type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>
53B. Toilet tissue availability	<input checked="" type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>
54. Garbage & refuse properly disposed; facilities maintained	<input checked="" type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>
55A. Physical facilities installed, maintained, & clean	<input checked="" type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>
55B. Private homes and living or sleeping quarters, use prohibition	<input checked="" type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>
56. Adequate ventilation & lighting; designated areas used	<input checked="" type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>

### MASSACHUSETTS ONLY REGULATIONS

Rules and Regulations adopted for use in Massachusetts only.

### Facilities

	IN	OUT	COS	REPEAT
57A. Catering	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
57B. When plans are reviewed, prerequisite for operations- valid permit	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
57C. Contents of plans and specifications, preoperational inspections	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
58. Mobile Food Operations	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
59. Temporary Food Establishments	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
60. Residential Kitchens	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

### Procedures

	IN	OUT	COS	REPEAT
61. Anti-choking Procedures	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
62. Tobacco Products: Notice and Sale	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
63. Food Allergy Awareness Requirements	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

*Assin*

Inspector

Acknowledged Receipt : Christina Flutie

Page 6 of 7

## Food Establishment Inspection Report - FDA

### **Footnote 1**

**Notes:**

Dish machine was not working at time of inspection. New machine but not operational. Informed that staff have not been trained how to use it.

### **Footnote 2**

**Notes:**

The 3 bay sink was not being used at the time of the inspection. Informed that it is has not been fully installed. In addition, there are no automatic detergent and sanitizer dispensers.

### **Footnote 3**

**Notes:**

The dish machine was not fully operational at the time of inspection.



Inspector

Acknowledged Receipt : Christina Flutie

Page 7 of 7



City of Newton  
Health and Human Services  
Deborah Youngblood, PhD, Commissioner  
1000 Commonwealth Ave Newton, MA 02459  
(617) 796-1420



Public Health  
Prevent. Promote. Protect.

Food Establishment Inspection Report - FDA

Insp Date: 9/16/2019  
Business: Cabot School  
229 Cabot St.

Business ID: 1N2092

Newton, MA 02460

Inspection: 6N000141  
Section: 1  
Phone: 617-559-9400  
Inspector: 1N11123 Nicola Assan  
Reason: 2-Re-inspection  
Results: No Follow-up R2

Inspection Summary

Official Order for Correction: Based on an inspection today, the items checked indicate violations of 105 CMR 590.000/ 2013 Federal Food Code. This report, when signed below by the Commissioner of Health / Agent constitutes an order by the Commissioner of Health. Failure to correct violations cited in this report may result in suspension or revocation of the food establishment permit and cessation of food establishment operations. If aggrieved by this order, you have the right to a hearing. The request must be in writing and submitted to the Commissioner of Health at the above address within 10 days of receipt of this order.

Est. Type 1 - Food Svc Establish License/Permit # \_\_\_\_\_ Risk Category 02 Risk Level Observed 02 Low

Foodborne Illness Complaint Investigated (All) ☐ Involving More Than Two Persons ☐

FOODBORNE ILLNESS RISK FACTORS AND PUBLIC HEALTH INTERVENTIONS

Compliance status: IN = in compliance OUT = not in compliance N/O = not observed N/A = not applicable

Marked in appropriate box for COS and/or R. COS = corrected on-site during inspection R = repeat violation

Risk factors are improper practices or procedures identified as the most prevalent contributing factors of foodborne illness or injury. Public Health Interventions are control measures to prevent foodborne illnesses or injury.

Supervision

1. PIC Present, Knowledge and Duties

IN	OUT	N/O	N/A	COS	REPEAT
<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>

2. Certified Food Protection Manager

<input checked="" type="radio"/>	<input type="radio"/>		<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
----------------------------------	-----------------------	--	-----------------------	--------------------------	--------------------------

Employee Health / Responding to Contamination Events

3A. Employee Health: PIC Knowledge, Responsibilities & Reporting

IN	OUT	N/O	N/A	COS	REPEAT
<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>

3B. Employee Reporting to PIC

<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>
----------------------------------	-----------------------	--	--	--------------------------	--------------------------

4. Proper Use of Restriction & Exclusion

<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>
----------------------------------	-----------------------	--	--	--------------------------	--------------------------

5. Clean-up of Vomiting and Diarrheal Events

<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>
----------------------------------	-----------------------	--	--	--------------------------	--------------------------

Good Hygienic Practices

6A. Proper eating, tasting, drinking, or tobacco use

IN	OUT	N/O	N/A	COS	REPEAT
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>

6B. Preventing contamination when tasting

<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>
----------------------------------	-----------------------	-----------------------	--	--------------------------	--------------------------

*Assan*

Inspector

Acknowledged Receipt : Christina Flutie

Page 1 of 6

## Food Establishment Inspection Report - FDA

### Good Hygienic Practices

7. No discharge from eyes, nose, and mouth

IN	OUT	N/O	N/A	COS	REPEAT
<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>

### Control of Hands as a Vehicle of Contamination

8A. Hands clean & properly washed

<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>
----------------------------------	-----------------------	-----------------------	--	--------------------------	--------------------------

8B. Where to wash, hand antiseptics

<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>
----------------------------------	-----------------------	-----------------------	--	--------------------------	--------------------------

9. No bare hand contact with RTE food or a pre-approved alternative procedure properly allowed

<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
----------------------------------	-----------------------	-----------------------	-----------------------	--------------------------	--------------------------

10A. Adequate handwashing sinks properly supplied and accessible

<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>
----------------------------------	-----------------------	--	--	--------------------------	--------------------------

10B. Handwashing sinks accessible with proper signage, handwashing aids

<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>
----------------------------------	-----------------------	--	--	--------------------------	--------------------------

### Approved Sources

11A. Milk, eggs, juice, bottled water, hermetically sealed food, game animals

<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
----------------------------------	-----------------------	-----------------------	-----------------------	--------------------------	--------------------------

11B. Packaged foods, labeling, whole muscle beef

<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
-----------------------	-----------------------	-----------------------	----------------------------------	--------------------------	--------------------------

11C. Obtaining raw fish, packaged meat & poultry, eggs

<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
-----------------------	-----------------------	----------------------------------	-----------------------	--------------------------	--------------------------

12A. Food received at proper temperature

<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
-----------------------	-----------------------	----------------------------------	-----------------------	--------------------------	--------------------------

12B. Shipping and receiving frozen food

<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
-----------------------	-----------------------	----------------------------------	-----------------------	--------------------------	--------------------------

13. Food in good condition, honestly presented, safe, & unadulterated

<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>
----------------------------------	-----------------------	--	--	--------------------------	--------------------------

13B. Food package integrity

<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>
----------------------------------	-----------------------	--	--	--------------------------	--------------------------

14A. Required records available: shellstock tags, parasite destruction

<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
-----------------------	-----------------------	-----------------------	----------------------------------	--------------------------	--------------------------

14B. Missing shellstock tags, destruction

<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
-----------------------	-----------------------	-----------------------	----------------------------------	--------------------------	--------------------------

14C. Parasite destruction- storing raw/partially cooked fish

<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
-----------------------	-----------------------	-----------------------	----------------------------------	--------------------------	--------------------------

### Protection from Contamination

15A. Food separated & protected

<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
----------------------------------	-----------------------	-----------------------	-----------------------	--------------------------	--------------------------

15B. Cleaning equip/utensils/food containers

<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
----------------------------------	-----------------------	-----------------------	-----------------------	--------------------------	--------------------------

16A. Food-contact surfaces: cleaned & sanitized immersion 171° F and above

<input type="radio"/>	<input checked="" type="radio"/>		<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
-----------------------	----------------------------------	--	-----------------------	--------------------------	--------------------------

Fail Notes

4-702.11

*\*Frequency of Sanitization of Utensils and Food-Contact Surfaces of Equipment  
[Currently throughout the day the establishment is using a sanitizing solution as a 'cleaner' for surfaces and some equipment that do not regularly get cleaned in the dish machine. Sanitizer is NOT a cleaner. Cleaning is a three (3) step process: Wash, Rinse then Sanitize. A container with soapy water shall be available for proper cleaning. The use of green and red buckets are HIGHLY recommended for washing and sanitizing respectively (at the time of the inspection, there was only one (1) red bucket in the kitchen). Sanitizer also does not remove allergens. To remove allergens use a soapy water solution. If a surface needs to be cleaned from crumbs or ingredients (not allergens or raw meats) use a disposable paper towel. Use once and dispose. Review and train staff on proper cleaning procedures.]*

16B. Food contact surfaces cleaned and sanitized NMT 194° F, NLT 180° F

<input checked="" type="radio"/>	<input type="radio"/>		<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
----------------------------------	-----------------------	--	-----------------------	--------------------------	--------------------------

*ASBOM*

Inspector

Acknowledged Receipt : Christina Flutie

Page 2 of 6

## Food Establishment Inspection Report - FDA

### Protection from Contamination

IN OUT N/O N/A COS REPEAT

16C. Mechanical warewashing equipment sanitization food contact surfaces, equip., utensils

☒ ☐ ☐ ☐ ☐ ☐

17. Proper disposition of returned, previously served reconditions, & unsafe food

☒ ☐ ☐ ☐ ☐ ☐

### Time/Temperature Control for Safety Food (TCS Food)

IN OUT N/O N/A COS REPEAT

18A. Proper cooking time & temperatures

☐ ☐ ☒ ☐ ☐ ☐

18B. Whole meat cooking and serving, storing

☐ ☐ ☐ ☒ ☐ ☐

18C. Microwave cooking of raw animal foods

☐ ☐ ☐ ☒ ☐ ☐

19. Proper reheating procedures for hot holding

☐ ☐ ☒ ☐ ☐ ☐

20. Proper cooling time & temperatures

☐ ☐ ☒ ☐ ☐ ☐

21. Proper hot holding temperatures

☐ ☐ ☒ ☐ ☐ ☐

22. Proper cold holding temperatures

☒ ☐ ☐ ☐ ☐ ☐

23. Proper Date Marking

☒ ☐ ☐ ☐ ☐ ☐

23B. TCS Foods Disposition

☒ ☐ ☐ ☐ ☐ ☐

24A. Time as a public health control: procedures

☐ ☐ ☐ ☒ ☐ ☐

24B. Time as a public health control: temperatures & discarding food

☐ ☐ ☐ ☒ ☐ ☐

24C. Time as a public health control: highly susceptible population (HSP)

☐ ☐ ☐ ☒ ☐ ☐

### Consumer Advisory

IN OUT N/O N/A COS REPEAT

25. Consumer advisory provided for raw or undercooked foods

☐ ☐ ☐ ☒ ☐ ☐

### Highly Susceptible Populations (HSP)

IN OUT N/O N/A COS REPEAT

26A. Pasteurized foods used; prohibited foods not offered

☐ ☐ ☐ ☒ ☐ ☐

26B. Reservice of foods

☐ ☐ ☐ ☒ ☐ ☐

### Chemical

IN OUT N/O N/A COS REPEAT

27. Food additives: approved and properly used

☐ ☐ ☐ ☒ ☐ ☐

28A. Toxic substances identified, stored and used

☒ ☐ ☐ ☐ ☐ ☐

28B. Poisonous materials, sanitizers, additives, medicines restriction, separation, storage

☒ ☐ ☐ ☐ ☐ ☐

28C. Conditions of Use: law

☒ ☐ ☐ ☐ ☐ ☐

### Conformance with Approved Procedures

IN OUT N/O N/A COS REPEAT

29A. Compliance with variance, specialized process, & HACCP plan

☐ ☐ ☐ ☒ ☐ ☐

29B. Treating juice- HACCP, reduced oxygen packaging w/out variance, conformance with approved procedures

☐ ☐ ☐ ☒ ☐ ☐

29C. When HACCP plan is required

☐ ☐ ☐ ☒ ☐ ☐

*Assm*

Inspector

Acknowledged Receipt : Christina Flutie

Page 3 of 6

## Food Establishment Inspection Report - FDA

### GOOD RETAIL PRACTICES

Good Retail Practices are preventative measures to control the addition of pathogens, chemicals, and physical objects into foods.

IN = In compliance   OUT = not in compliance   COS - corrected on -site during inspection   REPEAT = repeat violation

#### Safe Food and Water

	IN	OUT	N/O	N/A	COS	REPEAT
30. Pasteurized eggs used where required	<input type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>
31A. Water & ice from approved source	<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>
31B. Sampling, alternative water supply	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>
31C. Sampling report	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>
32. Variance obtained for specialized processing methods	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>

#### Food Temperature Control

	IN	OUT	N/O	N/A	COS	REPEAT
33A. Proper cooling methods used; adequate equipment for temperature control	<input type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>
33B. Frozen food	<input type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>
34. Plant food properly cooked for hot holding	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
35. Approved thawing methods used	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
36A. Thermometers provided and accurate	<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>
36B. Thermometers function properly	<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>

#### Food Identification

	IN	OUT	COS	REPEAT
37A. Food properly labeled; original container		<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
37B. Food labels, labeling of ingredients		<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

#### Prevention of Food Contamination

	IN	OUT	COS	REPEAT
38A. Insects, rodents, & animals not present		<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
38B. Handling prohibition, controlling pests, prohibiting animals		<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
39A. Contamination prevented during food storage		<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
39B. Food display; ice used as an exterior coolant prohibited as an ingredient		<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
39C. Consumer self-service operations- utensils and monitoring		<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
40A. Personal cleanliness- prohibition jewelry		<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
40B. Maintenance of fingernails		<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
41. Wiping cloths; properly used and stored		<input type="radio"/>	<input checked="" type="radio"/>	<input type="checkbox"/>

Fail Notes     3-304.14

*Wiping Cloths, Use Limitation*

*[Cloths in-use for wiping counters and other equipment surfaces must be held between uses in a chemical sanitizer solution.]*

42A. Washing Produce - following chemical manufacturers label	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
42B. Washing produce	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
42C. Washing produce- chemicals	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

*Arson*

Inspector

Acknowledged Receipt : Christina Flutie

Page 4 of 6

## Food Establishment Inspection Report - FDA

### Proper Use of Utensils

	IN	OUT	COS	REPEAT
43. In-use utensils; properly stored	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
44. Utensils, equipment & linens; properly stored, dried, and handled	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
45A. Single-use/ single service articles properly stored and used, required	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
45B. Single-use/service articles use limitation, kitchenware and tableware preventing contamination	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
46. Gloves used properly	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

### Utensils, Equipment and Vending

	IN	OUT	COS	REPEAT
47A. Food & non-food contact surfaces cleanable	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
47B. Food contact surfaces /utensils cleanability, molluscan shellfish tanks, consumer self-service	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
47C. Properly designed characteristics: food and non-food contact surfaces, molluscan shellfish tanks	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
48A. Warewashing facilities: installed, maintained, & used; test strips	<input type="radio"/>	<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

**Fail Notes**    4-302.13    *Temperature measuring devices, manual warewashing*  
*[The establishment did not have an irreversible registering temperature indicator for the dish machine. In hot water mechanical warewashing operations, an irreversible registering temperature indicator shall be provided and readily accessible for measuring utensil surface temperature. Obtain and use 160°F Thermolabels. Test the machine at least daily. A source for thermolabels is: [www.paperthermometer.com](http://www.paperthermometer.com)*  
*Instead of using thermolabels, a "DishTemp Plate Stimulating Dishwasher Tester" can be used (used by Newton Inspectors). It is not required to purchase this device, however, it can be a useful tool to easily monitor the actual final rinse temperature at the plate. This will allow an individual to determine how far 'out of compliance' the final rinse may be. Although other companies may sell the device, we purchased ours from Thermoworks.]*

48B. Operational warewashing machines	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
49. Non-food contact surfaces clean	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

### Physical Facilities

	IN	OUT	N/A	COS	REPEAT
50. Hot & cold water available; adequate pressure	<input checked="" type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>
51A. Plumbing installed; proper backflow devices	<input checked="" type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>
51B. Prohibiting a cross-connection, inspection and servicing system	<input checked="" type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>
51C. Approved system and cleanable fixtures, service sink	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
52A. Sewage and waste water properly disposed	<input checked="" type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>
52B. Grease traps easily accessible for cleaning	<input checked="" type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>
52C. Removing mobile food establishment waste	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
53A. Toilet facilities; properly constructed, supplied, & cleaned	<input checked="" type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>
53B. Toilet tissue availability	<input checked="" type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>
54. Garbage & refuse properly disposed; facilities maintained	<input checked="" type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>

*Handwritten signature: H. S. M.*

Inspector

Acknowledged Receipt : Christina Flutie

Page 5 of 6

## Food Establishment Inspection Report - FDA

### Physical Facilities

	IN	OUT	N/A	COS	REPEAT
55A. Physical facilities installed, maintained, & clean	<input checked="" type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>
55B. Private homes and living or sleeping quarters, use prohibition	<input checked="" type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>
56. Adequate ventilation & lighting; designated areas used	<input checked="" type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>

### MASSACHUSETTS ONLY REGULATIONS

Rules and Regulations adopted for use in Massachusetts only.

### Facilities

	IN	OUT	COS	REPEAT
57A. Catering	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
57B. When plans are reviewed, prerequisite for operations- valid permit	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
57C. Contents of plans and specifications, preoperational inspections	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
58. Mobile Food Operations	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
59. Temporary Food Establishments	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
60. Residential Kitchens	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

### Procedures

	IN	OUT	COS	REPEAT
61. Anti-choking Procedures	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
62. Tobacco Products: Notice and Sale	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
63. Food Allergy Awareness Requirements	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

*Assan*

Inspector

Acknowledged Receipt : Christina Flutie

Page 6 of 6



City of Newton  
Health and Human Services  
Deborah Youngblood, PhD, Commissioner  
1000 Commonwealth Ave Newton, MA 02459  
(617) 796-1420



Public Health  
Prevent. Promote. Protect.

Food Establishment Inspection Report - FDA

Insp Date: 9/28/2018  
Business: Carr School  
225 Nevada St.

Business ID: 1N2710

Newton, MA 02460

Inspection: 6N000048

Section: 1

Phone:

Inspector: 1N11123 Nicola Assan

Reason: 1-Routine

Results: No Follow-up R2

Inspection Summary

Official Order for Correction: Based on an inspection today, the items checked indicate violations of 105 CMR 590.000/ 2013 Federal Food Code. This report, when signed below by the Commissioner of Health / Agent constitutes an order by the Commissioner of Health. Failure to correct violations cited in this report may result in suspension or revocation of the food establishment permit and cessation of food establishment operations. If aggrieved by this order, you have the right to a hearing. The request must be in writing and submitted to the Commissioner of Health at the above address within 10 days of receipt of this order.

Est. Type 1-Food Svc Establish License/Permit # \_\_\_\_\_ Risk Category 02 Risk Level Observed 02 Low

Foodborne Illness Complaint Investigated (All) ☐ Involving More Than Two Persons ☐

FOODBORNE ILLNESS RISK FACTORS AND PUBLIC HEALTH INTERVENTIONS

Compliance status: IN = in compliance OUT = not in compliance N/O = not observed N/A = not applicable

Marked in appropriate box for COS and/or R. COS = corrected on-site during inspection R = repeat violation

Risk factors are improper practices or procedures identified as the most prevalent contributing factors of foodborne illness or injury. Public Health Interventions are control measures to prevent foodborne illnesses or injury.

Supervision

1. PIC Present, Knowledge and Duties

IN	OUT	N/O	N/A	COS	REPEAT
<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>

2. Certified Food Protection Manager

<input checked="" type="radio"/>	<input type="radio"/>		<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
----------------------------------	-----------------------	--	-----------------------	--------------------------	--------------------------

Employee Health / Responding to Contamination Events

3A. Employee Health: PIC Knowledge, Responsibilities & Reporting

<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>
----------------------------------	-----------------------	--	--	--------------------------	--------------------------

3B. Employee Reporting to PIC

<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>
----------------------------------	-----------------------	--	--	--------------------------	--------------------------

4. Proper Use of Restriction & Exclusion

<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>
----------------------------------	-----------------------	--	--	--------------------------	--------------------------

5. Clean-up of Vomiting and Diarrheal Events

<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>
----------------------------------	-----------------------	--	--	--------------------------	--------------------------

Good Hygienic Practices

6A. Proper eating, tasting, drinking, or tobacco use

<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>
----------------------------------	-----------------------	-----------------------	--	--------------------------	--------------------------

6B. Preventing contamination when tasting

<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>
----------------------------------	-----------------------	-----------------------	--	--------------------------	--------------------------

*Assan*

Inspector

Acknowledged Receipt : Tim Viveiros

Page 1 of 6

## Food Establishment Inspection Report - FDA

### Good Hygienic Practices

7. No discharge from eyes, nose, and mouth

IN	OUT	N/O	N/A	COS	REPEAT
<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>

### Control of Hands as a Vehicle of Contamination

8A. Hands clean & properly washed

IN	OUT	N/O	N/A	COS	REPEAT
<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>

8B. Where to wash, hand antiseptics

IN	OUT	N/O	N/A	COS	REPEAT
<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>

9. No bare hand contact with RTE food or a pre-approved alternative procedure properly allowed

IN	OUT	N/O	N/A	COS	REPEAT
<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

10A. Adequate handwashing sinks properly supplied and accessible

IN	OUT	N/O	N/A	COS	REPEAT
<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>

10B. Handwashing sinks accesible with proper signage, handwashing aids

IN	OUT	N/O	N/A	COS	REPEAT
<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>

### Approved Sources

11A. Milk, eggs, juice, bottled water, hermetically sealed food, game animals

IN	OUT	N/O	N/A	COS	REPEAT
<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

11B. Packaged foods, labeling, whole muscle beef

IN	OUT	N/O	N/A	COS	REPEAT
<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

11C. Obtaining raw fish, packaged meat & poultry, eggs

IN	OUT	N/O	N/A	COS	REPEAT
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

12A. Food received at proper temperature

IN	OUT	N/O	N/A	COS	REPEAT
<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

12B. Shipping and receiving frozen food

IN	OUT	N/O	N/A	COS	REPEAT
<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

13. Food in good condition, honestly presented, safe, & unadulterated

IN	OUT	N/O	N/A	COS	REPEAT
<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>

13B. Food package integrity

IN	OUT	N/O	N/A	COS	REPEAT
<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>

14A. Required records available: shellstock tags, parasite destruction

IN	OUT	N/O	N/A	COS	REPEAT
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

14B. Missing shellstock tags, destruction

IN	OUT	N/O	N/A	COS	REPEAT
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

14C. Parasite destruction- storing raw/partially cooked fish

IN	OUT	N/O	N/A	COS	REPEAT
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

### Protection from Contamination

15A. Food separated & protected

IN	OUT	N/O	N/A	COS	REPEAT
<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

15B. Cleaning equip/utensils/food containers

IN	OUT	N/O	N/A	COS	REPEAT
<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

16A. Food-contact surfaces: cleaned & sanitized immersion 171° F and above

IN	OUT	N/O	N/A	COS	REPEAT
<input type="radio"/>	<input checked="" type="radio"/>		<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

Fail Notes 4-501.114 (A-E, F 1&2)

*Chemical Sanitization - Temperature, pH, Concentration and Hardness  
[The concentration of the sanitizing solution in the 3 bay sink was too strong (500ppm). You must ensure that the concentration the sanitizing solution is in accordance with the manufacturer's instructions.]*

16B. Food contact surfaces cleaned and sanitized NMT 194° F, NLT 180° F

IN	OUT	N/O	N/A	COS	REPEAT
<input checked="" type="radio"/>	<input type="radio"/>		<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

16C. Mechanical warewashing equipment sanitization food contact surfaces, equip., utensils

IN	OUT	N/O	N/A	COS	REPEAT
<input type="radio"/>	<input type="radio"/>		<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

17. Proper disposition of returned, previously served reconditions, & unsafe food

IN	OUT	N/O	N/A	COS	REPEAT
<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>

### Time/Temperature Control for Safety Food (TCS Food)

18A. Proper cooking time & temperatures

IN	OUT	N/O	N/A	COS	REPEAT
<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

18B. Whole meat cooking and serving, storing

IN	OUT	N/O	N/A	COS	REPEAT
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

*Asson*

Inspector

Acknowledged Receipt : Tim Viveiros

Page 2 of 6

## Food Establishment Inspection Report - FDA

### Time/Temperature Control for Safety Food (TCS Food)

	IN	OUT	N/O	N/A	COS	REPEAT
18C. Microwave cooking of raw animal foods	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
19. Proper reheating procedures for hot holding	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
20. Proper cooling time & temperatures	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
21. Proper hot holding temperatures	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
22. Proper cold holding temperatures	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
23. Proper Date Marking	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
23B. TCS Foods Disposition	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
24A. Time as a public health control: procedures	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
24B. Time as a public health control: temperatures & discarding food	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
24C. Time as a public health control: highly susceptible population (HSP)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

### Consumer Advisory

	IN	OUT	N/O	N/A	COS	REPEAT
25. Consumer advisory provided for raw or undercooked foods	<input type="radio"/>	<input type="radio"/>		<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

### Highly Susceptible Populations (HSP)

	IN	OUT	N/O	N/A	COS	REPEAT
26A. Pasteurized foods used; prohibited foods not offered	<input type="radio"/>	<input type="radio"/>		<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
26B. Reservice of foods	<input type="radio"/>	<input type="radio"/>		<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

### Chemical

	IN	OUT	N/O	N/A	COS	REPEAT
27. Food additives: approved and properly used	<input type="radio"/>	<input type="radio"/>		<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
28A. Toxic substances identified, stored and used	<input checked="" type="radio"/>	<input type="radio"/>		<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
28B. Poisonous materials, sanitizers, additives, medicines restriction, separation, storage	<input checked="" type="radio"/>	<input type="radio"/>		<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
28C. Conditions of Use: law	<input checked="" type="radio"/>	<input type="radio"/>		<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

### Conformance with Approved Procedures

	IN	OUT	N/O	N/A	COS	REPEAT
29A. Compliance with variance, specialized process, & HACCP plan	<input type="radio"/>	<input type="radio"/>		<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
29B. Treating juice- HACCP, reduced oxygen packaging w/out variance, conformance with approved procedures	<input type="radio"/>	<input type="radio"/>		<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
29C. When HACCP plan is required	<input type="radio"/>	<input type="radio"/>		<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

### GOOD RETAIL PRACTICES

Good Retail Practices are preventative measures to control the addition of pathogens, chemicals, and physical objects into foods.

IN = In compliance OUT = not in compliance COS - corrected on -site during inspection REPEAT = repeat violation

### Safe Food and Water

	IN	OUT	N/O	N/A	COS	REPEAT
30. Pasteurized eggs used where required	<input type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>
31A. Water & ice from approved source	<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>
31B. Sampling, alternative water supply	<input type="radio"/>	<input type="radio"/>		<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

*NASSON*

Inspector

Acknowledged Receipt : Tim Viveiros

Page 3 of 6

## Food Establishment Inspection Report - FDA

### Safe Food and Water

31C. Sampling report

IN OUT N/O N/A COS REPEAT  
☐ ☐ ☒ ☐ ☐

32. Variance obtained for specialized processing methods

☐ ☐ ☒ ☐ ☐

### Food Temperature Control

33A. Proper cooling methods used; adequate equipment for temperature control

☐ ☐ ☐ ☐

33B. Frozen food

☐ ☐ ☐ ☐

34. Plant food properly cooked for hot holding

☒ ☐ ☐ ☐ ☐ ☐

35. Approved thawing methods used

☐ ☐ ☐ ☒ ☐ ☐

36A. Thermometers provided and accurate

☒ ☐ ☐ ☐

36B. Thermometers function properly

☒ ☐ ☐ ☐

### Food Identification

37A. Food properly labeled; original container

IN OUT COS REPEAT  
☒ ☐ ☐ ☐

37B. Food labels, labeling of ingredients

☒ ☐ ☐ ☐

### Prevention of Food Contamination

38A. Insects, rodents, & animals not present

☒ ☐ ☐ ☐

38B. Handling prohibition, controlling pests, prohibiting animals

☒ ☐ ☐ ☐

39A. Contamination prevented during food storage

☒ ☐ ☐ ☐

39B. Food display; ice used as an exterior coolant prohibited as an ingredient

☒ ☐ ☐ ☐

39C. Consumer self-service operations- utensils and monitoring

☒ ☐ ☐ ☐

40A. Personal cleanliness- prohibition jewelry

☒ ☐ ☐ ☐

40B. Maintenance of fingernails

☒ ☐ ☐ ☐

41. Wiping cloths; properly used and stored

☒ ☐ ☐ ☐

42A. Washing Produce - following chemical manufacturers label

☐ ☐ ☐ ☐

42B. Washing produce

☐ ☒ ☐ ☐

42C. Washing produce- chemicals

☐ ☐ ☐ ☐

### Proper Use of Utensils

43. In-use utensils; properly stored

IN OUT COS REPEAT  
☒ ☐ ☐ ☐

44. Utensils, equipment & linens; properly stored, dried, and handled

☒ ☐ ☐ ☐

45A. Single-use/ single service articles properly stored and used, required

☒ ☐ ☐ ☐

45B. Single-use/service articles use limitation, kitchenware and tableware preventing contamination

☒ ☐ ☐ ☐

46. Gloves used properly

☒ ☐ ☐ ☐

### Utensils, Equipment and Vending

47A. Food & non-food contact surfaces cleanable

IN OUT COS REPEAT  
☒ ☐ ☐ ☐



Inspector

Acknowledged Receipt : Tim Viveiros

Page 4 of 6

## Food Establishment Inspection Report - FDA

Utensils, Equipment and Vending		IN	OUT	COS	REPEAT
47B. Food contact surfaces /utensils cleanability, molluscan shellfish tanks, consumer self-service		<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
47C. Properly designed characteristics: food and non-food contact surfaces, molluscan shellfish tanks		<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
48A. Warewashing facilities: installed, maintained, & used; test strips		<input type="radio"/>	<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
Fail Notes	4-501.19 Manual warewashing equipment, wash solution temperature [The temperature of the water in the wash sink of the 3 bay sink compartment was 105.8 degrees fahrenheit. The temperature of the wash solution in manual warewashing equipment shall be maintained at not less than 110 degrees fahrenheit or the temperature specified on the cleaning agent manufacturer's label instructions.]				
48B. Operational warewashing machines		<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
49. Non-food contact surfaces clean		<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

Physical Facilities		IN	OUT	N/A	COS	REPEAT
50. Hot & cold water available; adequate pressure		<input checked="" type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>
51A. Plumbing installed; proper backflow devices		<input checked="" type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>
51B. Prohibiting a cross-connection, inspection and servicing system		<input checked="" type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>
51C. Approved system and cleanable fixtures, service sink		<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
52A. Sewage and waste water properly disposed		<input checked="" type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>
52B. Grease traps easily accessible for cleaning		<input checked="" type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>
52C. Removing mobile food establishment waste		<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
53A. Toilet facilities; properly constructed, supplied, & cleaned		<input checked="" type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>
53B. Toilet tissue availability		<input checked="" type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>
54. Garbage & refuse properly disposed; facilities maintained		<input checked="" type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>
55A. Physical facilities installed, maintained, & clean		<input checked="" type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>
55B. Private homes and living or sleeping quarters, use prohibition		<input checked="" type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>
56. Adequate ventilation & lighting; designated areas used		<input checked="" type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>

### MASSACHUSETTS ONLY REGULATIONS

Rules and Regulations adopted for use in Massachusetts only.

Facilities		IN	OUT	COS	REPEAT
57A. Catering		<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
57B. When plans are reviewed, prerequisite for operations- valid permit		<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
57C. Contents of plans and specifications, preoperational inspections		<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
58. Mobile Food Operations		<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
59. Temporary Food Establishments		<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
60. Residential Kitchens		<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

*Masson*

Inspector

Acknowledged Receipt : Tim Viveiros

Page 5 of 6

## Food Establishment Inspection Report - FDA

### Procedures

61. Anti-choking Procedures

62. Tobacco Products: Notice and Sale

63. Food Allergy Awareness Requirements

IN OUT COS REPEAT

☐ ☐ ☐ ☐

☐ ☐ ☐ ☐

☐ ☐ ☐ ☐



Inspector

Acknowledged Receipt : Tim Viveiros

Page 6 of 6



City of Newton  
Health and Human Services  
Deborah Youngblood, PhD, Commissioner  
1000 Commonwealth Ave Newton, MA 02459  
(617) 796-1420



PublicHealth  
Prevent. Promote. Protect.

Food Establishment Inspection Report - FDA

Insp Date: 3/12/2019  
Business: Carr School  
225 Nevada St.

Business ID: 1N2710

Newton, MA 02460

Inspection: 6N000089

Section: 1

Phone:

Inspector: 1N11123 Nicola Assan

Reason: 1-Routine

Results: No Follow-up R2

Inspection Summary

Official Order for Correction: Based on an inspection today, the items checked indicate violations of 105 CMR 590.000/ 2013 Federal Food Code. This report, when signed below by the Commissioner of Health / Agent constitutes an order by the Commissioner of Health. Failure to correct violations cited in this report may result in suspension or revocation of the food establishment permit and cessation of food establishment operations. If aggrieved by this order, you have the right to a hearing. The request must be in writing and submitted to the Commissioner of Health at the above address within 10 days of receipt of this order.

Est. Type 1-Food Svc Establish License/Permit # \_\_\_\_\_ Risk Category 02 Risk Level Observed 02 Low

Foodborne Illness Complaint Investigated (All) ☐ Involving More Than Two Persons ☐

FOODBORNE ILLNESS RISK FACTORS AND PUBLIC HEALTH INTERVENTIONS

Compliance status: IN = in compliance OUT = not in compliance N/O = not observed N/A = not applicable

Marked in appropriate box for COS and/or R. COS = corrected on-site during inspection R = repeat violation

Risk factors are improper practices or procedures identified as the most prevalent contributing factors of foodborne illness or injury. Public Health Interventions are control measures to prevent foodborne illnesses or injury.

Supervision

1. PIC Present, Knowledge and Duties

IN	OUT	N/O	N/A	COS	REPEAT
<input type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>

*This item has Notes. See Footnote 1 at end of questionnaire.*

2. Certified Food Protection Manager

<input type="radio"/>	<input type="radio"/>		<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
-----------------------	-----------------------	--	-----------------------	--------------------------	--------------------------

Employee Health / Responding to Contamination Events

3A. Employee Health: PIC Knowledge, Responsibilities & Reporting

IN	OUT	N/O	N/A	COS	REPEAT
<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>

3B. Employee Reporting to PIC

<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>
----------------------------------	-----------------------	--	--	--------------------------	--------------------------

4. Proper Use of Restriction & Exclusion

<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>
----------------------------------	-----------------------	--	--	--------------------------	--------------------------

5. Clean-up of Vomiting and Diarrheal Events

<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>
----------------------------------	-----------------------	--	--	--------------------------	--------------------------

Good Hygienic Practices

6A. Proper eating, tasting, drinking, or tobacco use

IN	OUT	N/O	N/A	COS	REPEAT
<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>

6B. Preventing contamination when tasting

<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>
----------------------------------	-----------------------	-----------------------	--	--------------------------	--------------------------

*Assan*

Inspector

Acknowledged Receipt : Tim Viveiros

Page 1 of 6

## Food Establishment Inspection Report - FDA

### Good Hygienic Practices

7. No discharge from eyes, nose, and mouth

IN	OUT	N/O	N/A	COS	REPEAT
<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>

### Control of Hands as a Vehicle of Contamination

8A. Hands clean & properly washed

IN	OUT	N/O	N/A	COS	REPEAT
<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>

8B. Where to wash, hand antiseptics

IN	OUT	N/O	N/A	COS	REPEAT
<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>

9. No bare hand contact with RTE food or a pre-approved alternative procedure properly allowed

IN	OUT	N/O	N/A	COS	REPEAT
<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

10A. Adequate handwashing sinks properly supplied and accessible

IN	OUT	N/O	N/A	COS	REPEAT
<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>

10B. Handwashing sinks accessible with proper signage, handwashing aids

IN	OUT	N/O	N/A	COS	REPEAT
<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>

### Approved Sources

11A. Milk, eggs, juice, bottled water, hermetically sealed food, game animals

IN	OUT	N/O	N/A	COS	REPEAT
<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

11B. Packaged foods, labeling, whole muscle beef

IN	OUT	N/O	N/A	COS	REPEAT
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

11C. Obtaining raw fish, packaged meat & poultry, eggs

IN	OUT	N/O	N/A	COS	REPEAT
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

12A. Food received at proper temperature

IN	OUT	N/O	N/A	COS	REPEAT
<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

12B. Shipping and receiving frozen food

IN	OUT	N/O	N/A	COS	REPEAT
<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

13. Food in good condition, honestly presented, safe, & unadulterated

IN	OUT	N/O	N/A	COS	REPEAT
<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>

13B. Food package integrity

IN	OUT	N/O	N/A	COS	REPEAT
<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>

14A. Required records available: shellstock tags, parasite destruction

IN	OUT	N/O	N/A	COS	REPEAT
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

14B. Missing shellstock tags, destruction

IN	OUT	N/O	N/A	COS	REPEAT
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

14C. Parasite destruction- storing raw/partially cooked fish

IN	OUT	N/O	N/A	COS	REPEAT
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

### Protection from Contamination

15A. Food separated & protected

IN	OUT	N/O	N/A	COS	REPEAT
<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

15B. Cleaning equip/utensils/food containers

IN	OUT	N/O	N/A	COS	REPEAT
<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

16A. Food-contact surfaces: cleaned & sanitized immersion 171° F and above

IN	OUT	N/O	N/A	COS	REPEAT
<input checked="" type="radio"/>	<input type="radio"/>		<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

16B. Food contact surfaces cleaned and sanitized NMT 194° F, NLT 180° F

IN	OUT	N/O	N/A	COS	REPEAT
<input checked="" type="radio"/>	<input type="radio"/>		<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

16C. Mechanical warewashing equipment sanitization food contact surfaces, equip., utensils

IN	OUT	N/O	N/A	COS	REPEAT
<input checked="" type="radio"/>	<input type="radio"/>		<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

17. Proper disposition of returned, previously served reconditions, & unsafe food

IN	OUT	N/O	N/A	COS	REPEAT
<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>

### Time/Temperature Control for Safety Food (TCS Food)

18A. Proper cooking time & temperatures

IN	OUT	N/O	N/A	COS	REPEAT
<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

18B. Whole meat cooking and serving, storing

IN	OUT	N/O	N/A	COS	REPEAT
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

18C. Microwave cooking of raw animal foods

IN	OUT	N/O	N/A	COS	REPEAT
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

19. Proper reheating procedures for hot holding

IN	OUT	N/O	N/A	COS	REPEAT
<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

20. Proper cooling time & temperatures

IN	OUT	N/O	N/A	COS	REPEAT
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

21. Proper hot holding temperatures

IN	OUT	N/O	N/A	COS	REPEAT
<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

*Ateser*

Inspector

Acknowledged Receipt : Tim Viveiros

Page 2 of 6

## Food Establishment Inspection Report - FDA

### Time/Temperature Control for Safety Food (TCS Food)

	IN	OUT	N/O	N/A	COS	REPEAT
22. Proper cold holding temperatures	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
23. Proper Date Marking	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
23B. TCS Foods Disposition	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
24A. Time as a public health control: procedures	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
24B. Time as a public health control: temperatures & discarding food	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
24C. Time as a public health control: highly susceptible population (HSP)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

### Consumer Advisory

	IN	OUT	N/O	N/A	COS	REPEAT
25. Consumer advisory provided for raw or undercooked foods	<input type="radio"/>	<input type="radio"/>		<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

### Highly Susceptible Populations (HSP)

	IN	OUT	N/O	N/A	COS	REPEAT
26A. Pasteurized foods used; prohibited foods not offered	<input type="radio"/>	<input type="radio"/>		<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
26B. Reservice of foods	<input type="radio"/>	<input type="radio"/>		<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

### Chemical

	IN	OUT	N/O	N/A	COS	REPEAT
27. Food additives: approved and properly used	<input type="radio"/>	<input type="radio"/>		<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
28A. Toxic substances identified, stored and used	<input checked="" type="radio"/>	<input type="radio"/>		<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
28B. Poisonous materials, sanitizers, additives, medicines restriction, separation, storage	<input checked="" type="radio"/>	<input type="radio"/>		<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
28C. Conditions of Use: law	<input checked="" type="radio"/>	<input type="radio"/>		<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

### Conformance with Approved Procedures

	IN	OUT	N/O	N/A	COS	REPEAT
29A. Compliance with variance, specialized process, & HACCP plan	<input type="radio"/>	<input type="radio"/>		<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
29B. Treating juice- HACCP, reduced oxygen packaging w/out variance, conformance with approved procedures	<input type="radio"/>	<input type="radio"/>		<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
29C. When HACCP plan is required	<input type="radio"/>	<input type="radio"/>		<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

### GOOD RETAIL PRACTICES

Good Retail Practices are preventative measures to control the addition of pathogens, chemicals, and physical objects into foods.

IN = In compliance    OUT = not in compliance    COS - corrected on -site during inspection    REPEAT = repeat violation

### Safe Food and Water

	IN	OUT	N/O	N/A	COS	REPEAT
30. Pasteurized eggs used where required	<input type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>
31A. Water & ice from approved source	<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>
31B. Sampling, alternative water supply	<input type="radio"/>	<input type="radio"/>		<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
31C. Sampling report	<input type="radio"/>	<input type="radio"/>		<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
32. Variance obtained for specialized processing methods	<input type="radio"/>	<input type="radio"/>		<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

### Food Temperature Control

	IN	OUT	N/O	N/A	COS	REPEAT
33A. Proper cooling methods used; adequate equipment for temperature control	<input type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>

*M. Esan*

Inspector

Acknowledged Receipt : Tim Viveiros

Page 3 of 6

## Food Establishment Inspection Report - FDA

### Food Temperature Control

	IN	OUT	N/O	N/A	COS	REPEAT
33B. Frozen food	<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>
34. Plant food properly cooked for hot holding	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
35. Approved thawing methods used	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
36A. Thermometers provided and accurate	<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>
36B. Thermometers function properly	<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>

### Food Identification

	IN	OUT	COS	REPEAT
37A. Food properly labeled; original container	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
37B. Food labels, labeling of ingredients	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

### Prevention of Food Contamination

	IN	OUT	COS	REPEAT
38A. Insects, rodents, & animals not present	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
38B. Handling prohibition, controlling pests, prohibiting animals	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
39A. Contamination prevented during food storage	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
39B. Food display; ice used as an exterior coolant prohibited as an ingredient	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
39C. Consumer self-service operations- utensils and monitoring	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
40A. Personal cleanliness- prohibition jewelry	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
40B. Maintenance of fingernails	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
41. Wiping cloths; properly used and stored	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
42A. Washing Produce - following chemical manufacturers label	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
42B. Washing produce	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
42C. Washing produce- chemicals	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

### Proper Use of Utensils

	IN	OUT	COS	REPEAT
43. In-use utensils; properly stored	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
44. Utensils, equipment & linens; properly stored, dried, and handled	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
45A. Single-use/ single service articles properly stored and used, required	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
45B. Single-use/service articles use limitation, kitchenware and tableware preventing contamination	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
46. Gloves used properly	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

### Utensils, Equipment and Vending

	IN	OUT	COS	REPEAT
47A. Food & non-food contact surfaces cleanable	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
47B. Food contact surfaces /utensils cleanability, molluscan shellfish tanks, consumer self-service	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
47C. Properly designed characteristics: food and non-food contact surfaces, molluscan shellfish tanks	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
48A. Warewashing facilities: installed, maintained, & used; test strips	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
48B. Operational warewashing machines	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

*Handwritten signature: N. A. S. A. N.*

Inspector

Acknowledged Receipt : Tim Viveiros

Page 4 of 6

## Food Establishment Inspection Report - FDA

### Utensils, Equipment and Vending

49. Non-food contact surfaces clean

IN	OUT	COS	REPEAT
<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

### Physical Facilities

50. Hot & cold water available; adequate pressure

IN	OUT	N/A	COS	REPEAT
<input checked="" type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>

51A. Plumbing installed; proper backflow devices

<input checked="" type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>
----------------------------------	-----------------------	--	--------------------------	--------------------------

51B. Prohibiting a cross-connection, inspection and servicing system

<input checked="" type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>
----------------------------------	-----------------------	--	--------------------------	--------------------------

51C. Approved system and cleanable fixtures, service sink

<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
-----------------------	-----------------------	-----------------------	--------------------------	--------------------------

52A. Sewage and waste water properly disposed

<input checked="" type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>
----------------------------------	-----------------------	--	--------------------------	--------------------------

52B. Grease traps easily accessible for cleaning

<input checked="" type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>
----------------------------------	-----------------------	--	--------------------------	--------------------------

52C. Removing mobile food establishment waste

<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
-----------------------	-----------------------	----------------------------------	--------------------------	--------------------------

53A. Toilet facilities; properly constructed, supplied, & cleaned

<input checked="" type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>
----------------------------------	-----------------------	--	--------------------------	--------------------------

53B. Toilet tissue availability

<input checked="" type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>
----------------------------------	-----------------------	--	--------------------------	--------------------------

54. Garbage & refuse properly disposed; facilities maintained

<input checked="" type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>
----------------------------------	-----------------------	--	--------------------------	--------------------------

55A. Physical facilities installed, maintained, & clean

<input checked="" type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>
----------------------------------	-----------------------	--	--------------------------	--------------------------

55B. Private homes and living or sleeping quarters, use prohibition

<input checked="" type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>
----------------------------------	-----------------------	--	--------------------------	--------------------------

56. Adequate ventilation & lighting; designated areas used

<input checked="" type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>
----------------------------------	-----------------------	--	--------------------------	--------------------------

### MASSACHUSETTS ONLY REGULATIONS

Rules and Regulations adopted for use in Massachusetts only.

#### Facilities

57A. Catering

IN	OUT	COS	REPEAT
<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

57B. When plans are reviewed, prerequisite for operations- valid permit

<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
-----------------------	-----------------------	--------------------------	--------------------------

57C. Contents of plans and specifications, preoperational inspections

<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
-----------------------	-----------------------	--------------------------	--------------------------

58. Mobile Food Operations

<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
-----------------------	-----------------------	--------------------------	--------------------------

59. Temporary Food Establishments

<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
-----------------------	-----------------------	--------------------------	--------------------------

60. Residential Kitchens

<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
-----------------------	-----------------------	--------------------------	--------------------------

#### Procedures

61. Anti-choking Procedures

IN	OUT	COS	REPEAT
<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

62. Tobacco Products: Notice and Sale

<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
-----------------------	-----------------------	--------------------------	--------------------------

63. Food Allergy Awareness Requirements

<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
-----------------------	-----------------------	--------------------------	--------------------------

*Masan*

Inspector

Acknowledged Receipt : Tim Viveiros

Page 5 of 6

## Food Establishment Inspection Report - FDA

### **Footnote 1**

#### **Notes:**

The PIC was not present at time of visit since she has to provided cover at Newton North High School. However, her assistant did not have the serve safe certificate but was well versed in food safety and hygiene matters.

*Masan*

Inspector

Acknowledged Receipt : Tim Viveiros

Page 6 of 6



City of Newton  
Health and Human Services  
Deborah Youngblood, PhD, Commissioner  
1000 Commonwealth Ave Newton, MA 02459  
(617) 796-1420



Public Health  
Prevent, Promote, Protect

Food Establishment Inspection Report - FDA

Insp Date: 12/11/2017 Business ID: 1N2118

Business: Countryside School  
191 Dedham St.

Newton, MA 02464

Inspection: 6N000008

Section: 3

Phone: 559-9450

Inspector: 1N11123 Nicola Assan

Reason: 1-Routine

Results: No Follow-up R2

Inspection Summary

Official Order for Correction: Based on an inspection today, the items checked indicate violations of 105 CMR 590.000/ 2013 Federal Food Code. This report, when signed below by the Commissioner of Health / Agent constitutes an order by the Commissioner of Health. Failure to correct violations cited in this report may result in suspension or revocation of the food establishment permit and cessation of food establishment operations. If aggrieved by this order, you have the right to a hearing. The request must be in writing and submitted to the Commissioner of Health at the above address within 10 days of receipt of this order.

Est. Type 1 - Food Svc Establis License/Permit # Risk Category 02 Risk Level Observed 02 Low

Foodborne Illness Complaint Investigated (All) ☐ Involving More Than Two Persons ☐

FOODBORNE ILLNESS RISK FACTORS AND PUBLIC HEALTH INTERVENTIONS

Compliance status: IN = in compliance OUT = not in compliance N/O = not observed N/A = not applicable

Marked in appropriate box for COS and/or R. COS = corrected on-site during inspection R = repeat violation

Risk factors are improper practices or procedures identified as the most prevalent contributing factors of foodborne illness or injury. Public Health Interventions are control measures to prevent foodborne illnesses or injury.

Supervision

1. PIC Present, Knowledge and Duties

IN	OUT	N/O	N/A	COS	REPEAT
<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>

2. Certified Food Protection Manager

<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>
-----------------------	----------------------------------	-----------------------	--	--------------------------	--------------------------

**This item has Notes. See Footnote 1 at end of questionnaire.**

Fail Notes 2-102.12 (A) Certified food protection manager  
[The PIC did not have the food protection certification.  
The Food Code states that the person in charge has a  
responsibility to ensure that food is safe to eat. A person  
in charge can demonstrate required knowledge of food  
safety through certification and passing an examination  
that is part of an accredited program.]

Employee Health / Responding to Contamination Events

3A. Employee Health: PIC Knowledge, Responsibilities & Reporting

IN	OUT	N/O	N/A	COS	REPEAT
<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>

3B. Employee Reporting to PIC

<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>
----------------------------------	-----------------------	--	--	--------------------------	--------------------------

Inspector

Acknowledged Receipt :

## Food Establishment Inspection Report - FDA

### Employee Health / Responding to Contamination Events

4. Proper Use of Restriction & Exclusion

IN OUT N/O N/A COS REPEAT  
☒ ☐ ☐ ☐

5. Clean-up of Vomiting and Diarrheal Events

☒ ☐ ☐ ☐

### Good Hygienic Practices

6A. Proper eating, tasting, drinking, or tobacco use

☒ ☐ ☐ ☐ ☐

6B. Preventing contamination when tasting

☒ ☐ ☐ ☐ ☐

7. No discharge from eyes, nose, and mouth

☒ ☐ ☐ ☐ ☐

### Control of Hands as a Vehicle of Contamination

8A. Hands clean & properly washed

☒ ☐ ☐ ☐ ☐

***This item has Notes. See Footnote 2 at end of questionnaire.***

8B. Where to wash, hand antiseptics

☒ ☐ ☐ ☐ ☐

9. No bare hand contact with RTE food or a pre-approved alternative procedure properly allowed

☒ ☐ ☐ ☐ ☐ ☐

10A. Adequate handwashing sinks properly supplied and accessible

☒ ☐ ☐ ☐

10B. Handwashing sinks accessible with proper signage, handwashing aids

☒ ☐ ☐ ☐

### Approved Sources

11A. Milk, eggs, juice, bottled water, hermetically sealed food, game animals

☒ ☐ ☐ ☐ ☐ ☐

11B. Packaged foods, labeling, whole muscle beef

☒ ☐ ☐ ☐ ☐ ☐

11C. Obtaining raw fish, packaged meat & poultry, eggs

☐ ☐ ☐ ☒ ☐ ☐

12A. Food received at proper temperature

☐ ☐ ☒ ☐ ☐ ☐

12B. Shipping and receiving frozen food

☐ ☐ ☐ ☒ ☐ ☐

13. Food in good condition, honestly presented, safe, & unadulterated

☒ ☐ ☐ ☐

13B. Food package integrity

☒ ☐ ☐ ☐

14A. Required records available: shellstock tags, parasite destruction

☐ ☐ ☐ ☒ ☐ ☐

14B. Missing shellstock tags, destruction

☐ ☐ ☐ ☒ ☐ ☐

14C. Parasite destruction- storing raw/partially cooked fish

☐ ☐ ☐ ☒ ☐ ☐

### Protection from Contamination

15A. Food separated & protected

☒ ☐ ☐ ☐ ☐ ☐

15B. Cleaning equip/utensils/food containers

☒ ☐ ☐ ☐ ☐ ☐

16A. Food-contact surfaces: cleaned & sanitized immersion 171° F and above

☒ ☐ ☐ ☐ ☐

16B. Food contact surfaces cleaned and sanitized NMT 194° F, NLT 180° F

☐ ☐ ☒ ☐ ☐

16C. Mechanical warewashing equipment sanitization food contact surfaces, equip., utensils

☐ ☐ ☒ ☐ ☐

17. Proper disposition of returned, previously served reconditions, & unsafe food

☒ ☐ ☐ ☐

### Time/Temperature Control for Safety Food (TCS Food)

IN OUT N/O N/A COS REPEAT

Inspector \_\_\_\_\_

Acknowledged Receipt: \_\_\_\_\_

## Food Establishment Inspection Report - FDA

### Time/Temperature Control for Safety Food (TCS Food)

	IN	OUT	N/O	N/A	COS	REPEAT
18A. Proper cooking time & temperatures	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
18B. Whole meat cooking and serving, storing	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
18C. Microwave cooking of raw animal foods	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
19. Proper reheating procedures for hot holding	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
20. Proper cooling time & temperatures	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
21. Proper hot holding temperatures	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
22. Proper cold holding temperatures	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

**This item has Notes. See Footnote 3 at end of questionnaire.**

Fail Notes | 3-501.16(A2 &B) \*Cold PHFs Maintained at or Below 41oF- also pertains to untreated eggs (45F)  
[The turkey salad sandwiches recorded a temperature of 58.8 degrees F. Although they were place on ice packs, the ice packs were not frozen. In addition, the Victory refrigerator recorded a temperature o f62.2 degrees F and therefore not able to maintain a temperature of 41 degrees F, necessary to prevent the growth of microorganisms in food.]

23. Proper Date Marking	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
23B. TCS Foods Disposition	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
24A. Time as a public health control: procedures	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
24B. Time as a public health control: temperatures & discarding food	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
24C. Time as a public health control: highly susceptible population (HSP)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

### Consumer Advisory

25. Consumer advisory provided for raw or undercooked foods	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
---	-----------------------	-----------------------	-----------------------	----------------------------------	--------------------------	--------------------------

### Highly Susceptible Populations (HSP)

26A. Pasteurized foods used; prohibited foods not offered	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
26B. Reservice of foods	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

### Chemical

27. Food additives: approved and properly used	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
28A. Toxic substances identified, stored and used	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
28B. Poisonous materials, sanitizers, additives, medicines restriction, separation, storage	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
28C. Conditions of Use: law	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

### Conformance with Approved Procedures

29A. Compliance with variance, specialized process, & HACCP plan	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
29B. Treating juice- HACCP, reduced oxygen packaging w/out variance, conformance with approved procedures	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
29C. When HACCP plan is required	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

Inspector \_\_\_\_\_

Acknowledged Receipt : \_\_\_\_\_

Page 3 of 8

## Food Establishment Inspection Report - FDA

### GOOD RETAIL PRACTICES

Good Retail Practices are preventative measures to control the addition of pathogens, chemicals, and physical objects into foods.

IN = In compliance OUT = not in compliance COS - corrected on -site during inspection REPEAT = repeat violation

#### Safe Food and Water

	IN	OUT	N/O	N/A	COS	REPEAT
30. Pasteurized eggs used where required	<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>
31A. Water & ice from approved source	<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>
31B. Sampling, alternative water supply	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>
31C. Sampling report	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>
32. Variance obtained for specialized processing methods	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>

#### Food Temperature Control

	IN	OUT	N/O	N/A	COS	REPEAT
33A. Proper cooling methods used; adequate equipment for temperature control	<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>
<i>This item has Notes. See Footnote 4 at end of questionnaire.</i>						
33B. Frozen food	<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>
<i>This item has Notes. See Footnote 5 at end of questionnaire.</i>						
34. Plant food properly cooked for hot holding	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
35. Approved thawing methods used	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
36A. Thermometers provided and accurate	<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>
36B. Thermometers function properly	<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>

#### Food Identification

	IN	OUT	COS	REPEAT
37A. Food properly labeled; original container	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
37B. Food labels, labeling of ingredients	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

#### Prevention of Food Contamination

	IN	OUT	COS	REPEAT
38A. Insects, rodents, & animals not present	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
38B. Handling prohibition, controlling pests, prohibiting animals	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
39A. Contamination prevented during food storage	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
39B. Food display; ice used as an exterior coolant prohibited as an ingredient	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
39C. Consumer self-service operations- utensils and monitoring	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
40A. Personal cleanliness- prohibition jewelry	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
40B. Maintenance of fingernails	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
41. Wiping cloths; properly used and stored	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
42A. Washing Produce - following chemical manufacturers label	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
42B. Washing produce	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
42C. Washing produce- chemicals	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

Inspector \_\_\_\_\_

Acknowledged Receipt: \_\_\_\_\_

## Food Establishment Inspection Report - FDA

### Proper Use of Utensils

	IN	OUT	COS	REPEAT
43. In-use utensils; properly stored	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
44. Utensils, equipment & linens; properly stored, dried, and handled	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
45A. Single-use/ single service articles properly stored and used, required	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
45B. Single-use/service articles use limitation, kitchenware and tableware preventing contamination	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
46. Gloves used properly	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

### Utensils, Equipment and Vending

	IN	OUT	COS	REPEAT
47A. Food & non-food contact surfaces cleanable	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
47B. Food contact surfaces /utensils cleanability, molluscan shellfish tanks, consumer self-service	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
47C. Properly designed characteristics: food and non-food contact surfaces, molluscan shellfish tanks	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
48A. Warewashing facilities: installed, maintained, & used; test strips	<input type="radio"/>	<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

**This item has Notes. See Footnote 6 at end of questionnaire.**

Fail Notes	4-302.14	<p><b>Sanitizing Solutions, Testing Devices</b>  <i>[The concentration of the sanitising solution in the 3 bay sink was too strong (&gt;500ppm). The recommended concentration from Ecolab (being used in the school kitchen) is 150-400ppm. In addition, the test strips used by the PIC did not record the concentration (i.e. did not change colour). There needs to be devices/testing strips that can adequately measure the concentration of sanitising solutions.]</i></p>
------------	----------	---

48B. Operational warewashing machines	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
---------------------------------------	-----------------------	-----------------------	--------------------------	--------------------------

**This item has Notes. See Footnote 7 at end of questionnaire.**

49. Non-food contact surfaces clean	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
-------------------------------------	----------------------------------	-----------------------	--------------------------	--------------------------

### Physical Facilities

	IN	OUT	N/A	COS	REPEAT
50. Hot & cold water available; adequate pressure	<input checked="" type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>
51A. Plumbing installed; proper backflow devices	<input checked="" type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>
51B. Prohibiting a cross-connection, inspection and servicing system	<input checked="" type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>
51C. Approved system and cleanable fixtures, service sink	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
52A. Sewage and waste water properly disposed	<input checked="" type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>
52B. Grease traps easily accessible for cleaning	<input checked="" type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>
52C. Removing mobile food establishment waste	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
53A. Toilet facilities; properly constructed, supplied, & cleaned	<input checked="" type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>
53B. Toilet tissue availability	<input checked="" type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>
54. Garbage & refuse properly disposed; facilities maintained	<input checked="" type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>
55A. Physical facilities installed, maintained, & clean	<input checked="" type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>
55B. Private homes and living or sleeping quarters, use prohibition	<input checked="" type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>
56. Adequate ventilation & lighting; designated areas used	<input checked="" type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>

Inspector \_\_\_\_\_

Acknowledged Receipt : \_\_\_\_\_

Page 5 of 8

## Food Establishment Inspection Report - FDA

### MASSACHUSETTS ONLY REGULATIONS

Rules and Regulations adopted for use in Massachusetts only.

#### Facilities

57A. Catering

IN OUT COS REPEAT

☐ ☐ ☐ ☐

57B. When plans are reviewed, prerequisite for operations- valid permit

☐ ☐ ☐ ☐

57C. Contents of plans and specifications, preoperational inspections

☐ ☐ ☐ ☐

58. Mobile Food Operations

☐ ☐ ☐ ☐

59. Temporary Food Establishments

☐ ☐ ☐ ☐

60. Residential Kitchens

☐ ☐ ☐ ☐

#### Procedures

61. Anti-choking Procedures

IN OUT COS REPEAT

☐ ☐ ☐ ☐

62. Tobacco Products: Notice and Sale

☐ ☐ ☐ ☐

63. Food Allergy Awareness Requirements

☐ ☐ ☐ ☐

Inspector \_\_\_\_\_

Acknowledged Receipt : \_\_\_\_\_

Page 6 of 8

## Food Establishment Inspection Report - FDA

### **Footnote 1**

**Notes:**

The PIC (Jorgelina) informed that she attended the serve safe food hygiene training but she failed because the course was in English. She said she would prefer the course to be in Spanish but does not know when Sodexo will organise this. I mentioned that I will contact Rachel Oppenheimer who oversees food safety/hygiene in Newton Public Schools.

### **Footnote 2**

**Notes:**

### **Footnote 3**

**Notes:**

The PIC informed me that she is aware that the refrigerator is not maintaining the required (legal) temperature as per her records. She has reported this and is still waiting for the refrigerator to be repaired or replaced.

I asked the PIC to transfer PHFs (cheese, pepperoni) to the chilled unit holding the milk/drinks since this was maintaining a temperature of 38.8 degrees F to 40 degrees F.

### **Footnote 4**

**Notes:**

This box should not be marked because there are not foods that are cooled on the premises. Could not uncheck.

### **Footnote 5**

**Notes:**

No frozen food on site. Could not uncheck box!

### **Footnote 6**

**Notes:**

The strips used by the PIC did not record/change colour wrt testing the sanitising solution. The expiry date of the strips was January 2019 so they had not expired.

The PIC diluted the sanitising solution in the 3 bay sink (in my presence) so the the test strips gave a reading of around 200-400ppm. Informed the PIC that I would contact Rachel Oppenheimer about getting new testing strips.

## Food Establishment Inspection Report - FDA

### Footnote 7

**Notes:**

No dishwasher in the kitchen.

\_\_\_\_\_  
Inspector

\_\_\_\_\_  
Acknowledged Receipt :

Page 8 of 8



City of Newton  
Health and Human Services  
Deborah Youngblood, PhD, Commissioner  
1000 Commonwealth Ave Newton, MA 02459  
(617) 796-1420



Public Health  
Prevent, Promote, Protect

Food Establishment Inspection Report - FDA

Insp Date: 6/6/2018 Business ID: 1N2118  
Business: Countryside School  
191 Dedham St.

Newton, MA 02464

Inspection: 4N000455  
Section: 3  
Phone: 559-9450  
Inspector: 1N11124 Samantha Menard  
Reason: 1-Routine  
Results: No Follow-up

Inspection Summary

Official Order for Correction: Based on an inspection today, the items checked indicate violations of 105 CMR 590.000/ 2009 Federal Food Code. This report, when signed below by the Commissioner of Health / Agent constitutes an order by the Commissioner of Health. Failure to correct violations cited in this report may result in suspension or revocation of the food establishment permit and cessation of food establishment operations. If aggrieved by this order, you have the right to a hearing. The request must be in writing and submitted to the Commissioner of Health at the above address within 10 days of receipt of this order.

Est. Type 1 - Food Svc Establis License/Permit # Risk Category 02 Risk Level Observed 02 Low

FOODBORNE ILLNESS RISK FACTORS AND PUBLIC HEALTH INTERVENTIONS

Compliance status: IN = in compliance OUT = not in compliance N/O = not observed N/A = not applicable

Marked in appropriate box for COS and/or R. COS = corrected on-site during inspection R = repeat violation

Risk factors are improper practices or procedures identified as the most prevalent contributing factors of foodborne illness or injury. Public Health Interventions are control measures to prevent foodborne illnesses or injury.

Supervision

1A. PIC Present

IN OUT N/O N/A COS REPEAT

☒ ☐ ☐ ☐ ☐ ☐

B. Cert. food manager, knowledge, no critical violations

☐ ☒ ☐ ☐ ☐ ☐

Fail Notes 2-102.20

Food Protection Manager Certification  
[The PIC did not have the food protection manager certification. At least one employee who has a supervisory or management role must be a certified food protection manager.]

C. Duties of PIC

☒ ☐ ☐ ☐ ☐ ☐

Employee Health

2. Management, food employee and conditional employee; knowledge, responsibilities and reporting

IN OUT N/O N/A COS REPEAT

☒ ☐ ☐ ☐ ☐ ☐

3. Proper use of restriction and exclusion

☒ ☐ ☐ ☐ ☐ ☐

Good Hygienic Practices

IN OUT N/O N/A COS REPEAT

*Samantha Menard*

Inspector

Acknowledged Receipt : Jorgelina

Page 1 of 5

## Food Establishment Inspection Report - FDA

### Good Hygienic Practices

- 4A. Proper eating, tasting, drinking, or tobacco use
- B. Preventing contamination when tasting
5. No discharge from eyes, nose, and mouth

IN	OUT	N/O	N/A	COS	REPEAT
<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>
<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>
<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>

### Preventing Contamination by Hands

- 6A. Hands clean & properly washed
- B. Where to wash, hand antiseptics
7. No bare hand contact with RTE food or a pre-approved alternative procedure properly allowed
- 8A. Adequate handwashing sinks properly supplied and accessible
- B. Handwashing sinks accessible with proper signage, handwashing aids
- C. Conveniently located handwashing sink

IN	OUT	N/O	N/A	COS	REPEAT
<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>
<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>
<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>
<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>
<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>

### Approved Sources

- 9A. Milk, eggs, juice, bottled water, hermetically sealed food
- B. Fish and shellfish
10. Food received at proper temperature
11. Food in good condition, safe, & unadulterated

IN	OUT	N/O	N/A	COS	REPEAT
<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>

### Protection from Contamination

- 12A. Food separated & protected
- B. Gloves, use limitation, one task- contaminated
- 13A. Food-contact surfaces: cleaned & sanitized 171° F
- B. Food contact surfaces cleaned and sanitized NMT 194° F, NLT 180° F
- C. Mechanical warewashing equipment sanitization food contact surfaces, equip., utensils
14. Proper disposition of returned, previously served reconditions, & unsafe food

IN	OUT	N/O	N/A	COS	REPEAT
<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input checked="" type="radio"/>	<input type="radio"/>		<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="radio"/>	<input type="radio"/>		<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input checked="" type="radio"/>	<input type="radio"/>		<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>

### Potentially Hazardous Food Time/Temperature

15. Proper cooking time & temperatures
16. Proper reheating procedures for hot holding
17. Proper cooling time & temperatures
18. Proper hot holding temperatures

IN	OUT	N/O	N/A	COS	REPEAT
<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

#### Fail Notes

3-501.16 (A)

*\*Hot PHFs Maintained at or Above 135oF  
[Burgers in hot-holding unit in cafeteria were 130°F. Hot TCS food must be held at 135°F or greater. PIC tried to turn up the temperature on the hot holding unit, but it was already at its highest setting. Hot holding unit should be inspected and repaired to ensure it can maintain TCS food at proper temperatures. ]*

19. Proper cold holding temperatures

<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
----------------------------------	-----------------------	-----------------------	-----------------------	--------------------------	--------------------------

*Sam Manard*

Inspector

Acknowledged Receipt : Jorgelina

Page 2 of 5

## Food Establishment Inspection Report - FDA

### Potentially Hazardous Food Time/Temperature

20. Time as a public health control: procedures & record

IN	OUT	N/O	N/A	COS	REPEAT
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

### Highly Susceptible Populations

21. Pasteurized foods used; prohibited foods not offered

IN	OUT	N/O	N/A	COS	REPEAT
<input type="radio"/>	<input type="radio"/>		<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

### Chemical

22. Food additives: approved and properly used

IN	OUT	N/O	N/A	COS	REPEAT
<input type="radio"/>	<input type="radio"/>		<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

23A. Toxic substances properly identified, stored and used

<input type="radio"/>	<input checked="" type="radio"/>		<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
-----------------------	----------------------------------	--	-----------------------	--------------------------	--------------------------

Fail Notes 7-102.11

*\*Common Name - Working Containers  
[Sanitizer bottle in cafeteria was not labelled. All working containers used for storing cleaners and sanitizers taken from bulk supplies must be clearly labeled with the common name of the material. ]*

B. Restriction presence and use, restriction and storage of medicines

<input checked="" type="radio"/>	<input type="radio"/>		<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
----------------------------------	-----------------------	--	-----------------------	--------------------------	--------------------------

C. Storage- other personal care items

<input checked="" type="radio"/>	<input type="radio"/>		<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
----------------------------------	-----------------------	--	-----------------------	--------------------------	--------------------------

### GOOD RETAIL PRACTICES

Good Retail Practices are preventative measures to control the addition of pathogens, chemicals, and physical objects into foods.

IN = In compliance OUT = not in compliance COS - corrected on -site during inspection REPEAT = repeat violation

### Safe Food and Water

24. Water & ice from approved source

IN	OUT	N/O	N/A	COS	REPEAT
<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

### Food Temperature Control

25A. Proper cooling methods used; adequate equipment for temperature control

<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
----------------------------------	-----------------------	-----------------------	-----------------------	--------------------------	--------------------------

B. Frozen food

<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
----------------------------------	-----------------------	-----------------------	-----------------------	--------------------------	--------------------------

26. Plant food properly cooked for hot holding

<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
----------------------------------	-----------------------	-----------------------	-----------------------	--------------------------	--------------------------

27. Approved thawing methods used

<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
----------------------------------	-----------------------	-----------------------	-----------------------	--------------------------	--------------------------

28A. Thermometers provided and accurate

<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
----------------------------------	-----------------------	-----------------------	-----------------------	--------------------------	--------------------------

B. Thermometers function properly

<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
----------------------------------	-----------------------	-----------------------	-----------------------	--------------------------	--------------------------

### Food Identification

29A. Food properly labeled; original container

IN	OUT	COS	REPEAT
	<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

B. Food labels, labeling of ingredients

<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
----------------------------------	-----------------------	--------------------------	--------------------------

### Prevention of Food Contamination

30A. Insects, rodents, & animals not present

<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
----------------------------------	-----------------------	--------------------------	--------------------------

B. Handling prohibition, controlling pests, prohibiting animals

<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
----------------------------------	-----------------------	--------------------------	--------------------------

31A. Contamination prevented during food storage

<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
----------------------------------	-----------------------	--------------------------	--------------------------

B. Food display; ice used as an exterior coolant prohibited as an ingredient

<input type="radio"/>	<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
-----------------------	----------------------------------	--------------------------	--------------------------

*Sam M...*

Inspector

Acknowledged Receipt : Jorgelina

Page 3 of 5

## Food Establishment Inspection Report - FDA

### Prevention of Food Contamination

Fail Notes | 3-306.11 Food Display-Preventing Contamination by Consumers  
*[Burgers and fries on table for self-service were unprotected. Food on display should be protected from contamination by packaging, counter, service line, display cases, food guards or other effective means.]*

C. Consumer self-service operations- utensils and monitoring	⊙	○	□	□
32A. Personal cleanliness- prohibition jewelry	⊙	○	□	□
B. Maintenance of fingernails	⊙	○	□	□
33. Wiping cloths; properly used and stored	⊙	○	□	□
34. Washing fruits & vegetables	⊙	○	□	□

### Proper Use of Utensils

35. In-use utensils; properly stored	⊙	○	□	□
36. Utensils, equipment & linens; properly stored, dried, and handled	⊙	○	□	□
37A. Single-use/ single service articles properly stored and used, required	⊙	○	□	□
B. Single-use/service articles use limitation, kitchenware and tableware preventing contamination	⊙	○	□	□
38. Gloves used properly	⊙	○	□	□

### Utensils, Equipment and Vending

39A. Food & non-food contact surfaces cleanable	⊙	○	□	□
B. Food contact surfaces /utensils cleanability, molluscan shellfish tanks, consumer self-service	⊙	○	□	□
C. Properly designed characteristics: food and non-food contact surfaces, molluscan shellfish tanks	⊙	○	□	□
40A. Warewashing facilities: installed, maintained, & used; test strips	⊙	○	□	□
B. Operational warewashing machines	⊙	○	□	□
41. Non-food contact surfaces clean	⊙	○	□	□

### Physical Facilities

	IN	OUT	N/O	N/A	COS	REPEAT
42. Hot & cold water available; adequate pressure	⊙	○			□	□
43A. Plumbing installed; proper backflow devices	⊙	○			□	□
B. Prohibiting a cross-connection, non-drinking water, system maintained in good repair	⊙	○			□	□
C. Approved system and cleanable fixtures, service sink	⊙	○			□	□
44A. Sewage and waste water properly disposed	⊙	○			□	□
B. Grease traps easily accessible for cleaning	⊙	○			□	□
45A. Toilet facilities; properly constructed, supplied, & cleaned	⊙	○			□	□
B. Toilet tissue availability	⊙	○			□	□
46. Garbage & refuse properly disposed; facilities maintained	⊙	○			□	□
47A. Physical facilities installed, maintained, & clean	⊙	○			□	□

*Sam Morand*

Inspector

Acknowledged Receipt : Jorgelina

## Food Establishment Inspection Report - FDA

### Physical Facilities

B. Cleaning maintenance tools, preventing contamination

IN OUT N/O N/A COS REPEAT

☒ ☐ ☐ ☐

48. Adequate ventilation & lighting; designated areas used

☒ ☐ ☐ ☐

### MASSACHUSETTS ONLY REGULATIONS

Rules and Regulations adopted for use in Massachusetts only.

#### Facilities

49A. When plans are reviewed, prerequisite for operations- valid permit

IN OU CO REPEA

☐ ☐ ☐ ☐

B. Contents of plans and specifications, preoperational inspections

☐ ☐ ☐ ☐

#### Procedures

50. Anti-choking Procedures

IN OUT COS REPEAT

☒ ☐ ☐ ☐

51. Tobacco Products: Notice and Sale

☐ ☐ ☐ ☐



Inspector

Acknowledged Receipt : Jorgelina

Page 5 of 5



City of Newton  
Health and Human Services  
Deborah Youngblood, PhD, Commissioner  
1000 Commonwealth Ave Newton, MA 02459  
(617) 796-1420



**Public Health**  
Prevent. Promote. Protect.

Food Establishment Inspection Report - FDA

Insp Date: 10/25/2018 Business ID: 1N2118  
Business: Countryside School  
191 Dedham St.  
Newton, MA 02464

Inspection: 6N000058  
Section: 3  
Phone: 559-9450  
Inspector: 1N11123 Nicola Assan  
Reason: 1-Routine  
Results: No Follow-up R2

Inspection Summary

Official Order for Correction: Based on an inspection today, the items checked indicate violations of 105 CMR 590.000/ 2013 Federal Food Code. This report, when signed below by the Commissioner of Health / Agent constitutes an order by the Commissioner of Health. Failure to correct violations cited in this report may result in suspension or revocation of the food establishment permit and cessation of food establishment operations. If aggrieved by this order, you have the right to a hearing. The request must be in writing and submitted to the Commissioner of Health at the above address within 10 days of receipt of this order.

Est. Type 1 - Food Svc Establis License/Permit # \_\_\_\_\_ Risk Category 02 Risk Level Observed 02 Low

Foodborne Illness Complaint Investigated (All) ☐ Involving More Than Two Persons ☐

FOODBORNE ILLNESS RISK FACTORS AND PUBLIC HEALTH INTERVENTIONS

Compliance status: IN = in compliance OUT = not in compliance N/O = not observed N/A = not applicable

Marked in appropriate box for COS and/or R. COS = corrected on-site during inspection R = repeat violation

Risk factors are improper practices or procedures identified as the most prevalent contributing factors of foodborne illness or injury. Public Health Interventions are control measures to prevent foodborne illnesses or injury.

Supervision

- 1. PIC Present, Knowledge and Duties
- 2. Certified Food Protection Manager

IN	OUT	N/O	N/A	COS	REPEAT
<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>
<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>

***This item has Notes. See Footnote 1 at end of questionnaire.***

Employee Health / Responding to Contamination Events

- 3A. Employee Health: PIC Knowledge, Responsibilities & Reporting
- 3B. Employee Reporting to PIC
- 4. Proper Use of Restriction & Exclusion
- 5. Clean-up of Vomiting and Diarrheal Events

IN	OUT	N/O	N/A	COS	REPEAT
<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>
<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>
<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>
<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>

Good Hygienic Practices

- 6A. Proper eating, tasting, drinking, or tobacco use
- 6B. Preventing contamination when tasting

IN	OUT	N/O	N/A	COS	REPEAT
<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>
<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>

*Assan*

Inspector

Acknowledged Receipt : Tim Viveiros

Page 1 of 7

## Food Establishment Inspection Report - FDA

Good Hygienic Practices		IN	OUT	N/O	N/A	COS	REPEAT
7. No discharge from eyes, nose, and mouth		<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>

Control of Hands as a Vehicle of Contamination		IN	OUT	N/O	N/A	COS	REPEAT
8A. Hands clean & properly washed		<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>
8B. Where to wash, hand antiseptics		<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>
9. No bare hand contact with RTE food or a pre-approved alternative procedure properly allowed		<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
10A. Adequate handwashing sinks properly supplied and accessible		<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>
10B. Handwashing sinks accessible with proper signage, handwashing aids		<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>

Approved Sources		IN	OUT	N/O	N/A	COS	REPEAT
11A. Milk, eggs, juice, bottled water, hermetically sealed food, game animals		<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
11B. Packaged foods, labeling, whole muscle beef		<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
11C. Obtaining raw fish, packaged meat & poultry, eggs		<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
12A. Food received at proper temperature		<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
12B. Shipping and receiving frozen food		<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
13. Food in good condition, honestly presented, safe, & unadulterated		<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>
13B. Food package integrity		<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>
14A. Required records available: shellstock tags, parasite destruction		<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
14B. Missing shellstock tags, destruction		<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
14C. Parasite destruction- storing raw/partially cooked fish		<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

Protection from Contamination		IN	OUT	N/O	N/A	COS	REPEAT
15A. Food separated & protected		<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
15B. Cleaning equip/utensils/food containers		<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
16A. Food-contact surfaces: cleaned & sanitized immersion 171° F and above		<input type="radio"/>	<input checked="" type="radio"/>		<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

**Fail Notes**

4-501.114 (A-E, F 1&2)

*Chemical Sanitization - Temperature, pH, Concentration and Hardness*  
*[The concentration of the sanitizing solution in the 3 bay compartment sink was too strong (>500ppm). In addition, there appeared to be no sanitizing solution in the red buckets. A chemical sanitizer used in a sanitizing solution for a manual or mechanical operation shall be used in accordance with the manufacturer's instructions.]*

16B. Food contact surfaces cleaned and sanitized NMT 194° F, NLT 180° F		<input checked="" type="radio"/>	<input type="radio"/>		<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
16C. Mechanical warewashing equipment sanitization food contact surfaces, equip., utensils		<input checked="" type="radio"/>	<input type="radio"/>		<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
17. Proper disposition of returned, previously served reconditions, & unsafe food		<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>

Time/Temperature Control for Safety Food (TCS Food)		IN	OUT	N/O	N/A	COS	REPEAT
---	--	----	-----	-----	-----	-----	--------

*Assess*

Inspector

Acknowledged Receipt : Tim Viveiros

Page 2 of 7

## Food Establishment Inspection Report - FDA

### Time/Temperature Control for Safety Food (TCS Food)

	IN	OUT	N/O	N/A	COS	REPEAT
18A. Proper cooking time & temperatures	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
18B. Whole meat cooking and serving, storing	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
18C. Microwave cooking of raw animal foods	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
19. Proper reheating procedures for hot holding	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
20. Proper cooling time & temperatures	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
21. Proper hot holding temperatures	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

**Fail Notes** 3-501.16 (A) *\*Hot TCS foods Maintained at or Above 135oF, Also for whole meat roasts (130F and above)  
[The temperature of the minced beef in the tacos was 133.7 degrees F. Although these food items are being used and replaced, the unit is not holding food at 135 degrees F or above. If the hot holding unit can no longer properly hold foods at 135 degrees F or above, then it needs to be replaced. Except during preparation, cooking or cooling or when time is use as the public health control, TCS (time/temperature control for safety food) food shall be maintained at 135 degrees F or above.]*

22. Proper cold holding temperatures ☐ ☒ ☐ ☐ ☐ ☐

**Fail Notes** 3-501.16(A2 &B) *\*Cold PHFs Maintained at or Below 41oF- also pertains to untreated eggs (45F)  
[The temperature of the lettuce, cheese and tomatoes in the serving unit was 49.3, 51.8 and 43.3 degrees F respectively. Maintain the internal temperatures of TCS foods at 41 degrees F or below.]*

23. Proper Date Marking ☒ ☐ ☐ ☐ ☐ ☐

23B. TCS Foods Disposition ☒ ☐ ☐ ☐ ☐ ☐

24A. Time as a public health control: procedures ☐ ☐ ☐ ☒ ☐ ☐

24B. Time as a public health control: temperatures & discarding food ☐ ☐ ☐ ☒ ☐ ☐

24C. Time as a public health control: highly susceptible population (HSP) ☐ ☐ ☐ ☒ ☐ ☐

### Consumer Advisory

25. Consumer advisory provided for raw or undercooked foods ☐ ☐ ☐ ☒ ☐ ☐

### Highly Susceptible Populations (HSP)

26A. Pasteurized foods used; prohibited foods not offered ☐ ☐ ☐ ☒ ☐ ☐

26B. Reservice of foods ☐ ☐ ☐ ☒ ☐ ☐

### Chemical

27. Food additives: approved and properly used ☐ ☐ ☐ ☒ ☐ ☐

28A. Toxic substances identified, stored and used ☒ ☐ ☐ ☐ ☐ ☐

28B. Poisonous materials, sanitizers, additives, medicines restriction, separation, storage ☒ ☐ ☐ ☐ ☐ ☐

28C. Conditions of Use: law ☒ ☐ ☐ ☐ ☐ ☐

*Asson*

Inspector

Acknowledged Receipt : Tim Viveiros

Page 3 of 7

## Food Establishment Inspection Report - FDA

### Conformance with Approved Procedures

	IN	OUT	N/O	N/A	COS	REPEAT
29A. Compliance with variance, specialized process, & HACCP plan	<input type="radio"/>	<input type="radio"/>		<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
29B. Treating juice- HACCP, reduced oxygen packaging w/out variance, conformance with approved procedures	<input type="radio"/>	<input type="radio"/>		<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
29C. When HACCP plan is required	<input type="radio"/>	<input type="radio"/>		<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

### GOOD RETAIL PRACTICES

Good Retail Practices are preventative measures to control the addition of pathogens, chemicals, and physical objects into foods.

IN = In compliance OUT = not in compliance COS - corrected on -site during inspection REPEAT = repeat violation

### Safe Food and Water

	IN	OUT	N/O	N/A	COS	REPEAT
30. Pasteurized eggs used where required	<input type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>
31A. Water & ice from approved source	<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>
31B. Sampling, alternative water supply	<input type="radio"/>	<input type="radio"/>		<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
31C. Sampling report	<input type="radio"/>	<input type="radio"/>		<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
32. Variance obtained for specialized processing methods	<input type="radio"/>	<input type="radio"/>		<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

### Food Temperature Control

	IN	OUT	N/O	N/A	COS	REPEAT
33A. Proper cooling methods used; adequate equipment for temperature control	<input type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>
33B. Frozen food	<input type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>
34. Plant food properly cooked for hot holding	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
35. Approved thawing methods used	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
36A. Thermometers provided and accurate	<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>
36B. Thermometers function properly	<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>

### Food Identification

	IN	OUT	COS	REPEAT
37A. Food properly labeled; original container		<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
37B. Food labels, labeling of ingredients		<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

### Prevention of Food Contamination

	IN	OUT	COS	REPEAT
38A. Insects, rodents, & animals not present		<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
38B. Handling prohibition, controlling pests, prohibiting animals		<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
39A. Contamination prevented during food storage		<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
39B. Food display; ice used as an exterior coolant prohibited as an ingredient		<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
39C. Consumer self-service operations- utensils and monitoring		<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
40A. Personal cleanliness- prohibition jewelry		<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
40B. Maintenance of fingernails		<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
41. Wiping cloths; properly used and stored		<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
42A. Washing Produce - following chemical manufacturers label	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

*Assess*

Inspector

Acknowledged Receipt : Tim Viveiros

Page 4 of 7

## Food Establishment Inspection Report - FDA

Prevention of Food Contamination		IN	OUT	COS	REPEAT	
42B. Washing produce		<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>	
42C. Washing produce- chemicals		<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Proper Use of Utensils		IN	OUT	COS	REPEAT	
43. In-use utensils; properly stored		<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>	
44. Utensils, equipment & linens; properly stored, dried, and handled		<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>	
45A. Single-use/ single service articles properly stored and used, required		<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>	
45B. Single-use/service articles use limitation, kitchenware and tableware preventing contamination		<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>	
46. Gloves used properly		<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Utensils, Equipment and Vending		IN	OUT	COS	REPEAT	
47A. Food & non-food contact surfaces cleanable		<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>	
47B. Food contact surfaces /utensils cleanability, molluscan shellfish tanks, consumer self-service		<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>	
47C. Properly designed characteristics: food and non-food contact surfaces, molluscan shellfish tanks		<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>	
48A. Warewashing facilities: installed, maintained, & used; test strips		<input type="radio"/>	<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Fail Notes	4-501.19 Manual warewashing equipment, wash solution temperature <i>[The temperature of the wash solution in the 3 bay compartment sink was 93.9 degrees F. The wash solution temperature required in the Food Code is essential for removing organic matter. If the temperature is below 110 degrees F, the performance of the detergent may be adversely affected, e.g., animal fats that may be present on the dirty dishes would not be dissolved.]</i>					
48B. Operational warewashing machines		<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>	
49. Non-food contact surfaces clean		<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Physical Facilities		IN	OUT	N/A	COS	REPEAT
50. Hot & cold water available; adequate pressure		<input checked="" type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>
51A. Plumbing installed; proper backflow devices		<input type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>
51B. Prohibiting a cross-connection, inspection and servicing system		<input type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>
51C. Approved system and cleanable fixtures, service sink		<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
52A. Sewage and waste water properly disposed		<input checked="" type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>
52B. Grease traps easily accessible for cleaning		<input type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>
52C. Removing mobile food establishment waste		<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
53A. Toilet facilities; properly constructed, supplied, & cleaned		<input checked="" type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>
53B. Toilet tissue availability		<input checked="" type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>
54. Garbage & refuse properly disposed; facilities maintained		<input type="radio"/>	<input checked="" type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>

*Assess*

Inspector

Acknowledged Receipt : Tim Viveiros

Page 5 of 7

## Food Establishment Inspection Report - FDA

### Physical Facilities

IN OUT N/A COS REPEAT

Fail Notes

5-501.13

Receptacles

[A waste receptacle was not observed at the handsink. Provide a small trash receptacle at the handsink.]

55A. Physical facilities installed, maintained, & clean

☒ ☐ ☐ ☐

55B. Private homes and living or sleeping quarters, use prohibition

☒ ☐ ☐ ☐

56. Adequate ventilation & lighting; designated areas used

☒ ☐ ☐ ☐

### MASSACHUSETTS ONLY REGULATIONS

Rules and Regulations adopted for use in Massachusetts only.

### Facilities

IN OUT COS REPEAT

57A. Catering

☐ ☐ ☐ ☐

57B. When plans are reviewed, prerequisite for operations- valid permit

☐ ☐ ☐ ☐

57C. Contents of plans and specifications, preoperational inspections

☐ ☐ ☐ ☐

58. Mobile Food Operations

☐ ☐ ☐ ☐

59. Temporary Food Establishments

☐ ☐ ☐ ☐

60. Residential Kitchens

☐ ☐ ☐ ☐

### Procedures

IN OUT COS REPEAT

61. Anti-choking Procedures

☐ ☐ ☐ ☐

62. Tobacco Products: Notice and Sale

☐ ☐ ☐ ☐

63. Food Allergy Awareness Requirements

☐ ☐ ☐ ☐

*Assess*

Inspector

Acknowledged Receipt : Tim Viveiros

Page 6 of 7

## Food Establishment Inspection Report - FDA

### Footnote 1

#### **Notes:**

The PIC will be attending a serv safe course on 12th November 2018.



Inspector

Acknowledged Receipt : Tim Viveiros

Page 7 of 7



**City of Newton**  
**Health and Human Services**  
 Deborah Youngblood, PhD, Commissioner  
 1000 Commonwealth Ave Newton, MA 02459  
 (617) 796-1420



**Public Health**  
 Prevent. Promote. Protect.

**Food Establishment Inspection Report - FDA**

**Insp Date:** 5/13/2019      **Business ID:** 1N2118  
**Business:** Countryside School  
 191 Dedham St.  
  
 Newton, MA 02464

**Inspection:** 6N000119  
**Section:** 3  
**Phone:** 559-9450  
**Inspector:** 1N11123 Nicola Assan  
**Reason:** 1-Routine  
**Results:** No Follow-up R2

**Inspection Summary**

Official Order for Correction: Based on an inspection today, the items checked indicate violations of 105 CMR 590.000/ 2013 Federal Food Code. This report, when signed below by the Commissioner of Health / Agent constitutes an order by the Commissioner of Health. Failure to correct violations cited in this report may result in suspension or revocation of the food establishment permit and cessation of food establishment operations. If aggrieved by this order, you have the right to a hearing. The request must be in writing and submitted to the Commissioner of Health at the above address within 10 days of receipt of this order.

Est. Type 1 - Food Svc Establis License/Permit # \_\_\_\_\_ Risk Category 02 Risk Level Observed 02 Low

Foodborne Illness Complaint Investigated (All) ☐ Involving More Than Two Persons ☐

**FOODBORNE ILLNESS RISK FACTORS AND PUBLIC HEALTH INTERVENTIONS**

Compliance status: IN = in compliance OUT = not in compliance N/O = not observed N/A = not applicable

Marked in appropriate box for COS and/or R. COS = corrected on-site during inspection R = repeat violation

Risk factors are improper practices or procedures identified as the most prevalent contributing factors of foodborne illness or injury. Public Health Interventions are control measures to prevent foodborne illnesses or injury.

**Supervision**

- 1. PIC Present, Knowledge and Duties
- 2. Certified Food Protection Manager

IN	OUT	N/O	N/A	COS	REPEAT
<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>
<input checked="" type="radio"/>	<input type="radio"/>		<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

**Employee Health / Responding to Contamination Events**

- 3A. Employee Health: PIC Knowledge, Responsibilities & Reporting
- 3B. Employee Reporting to PIC
- 4. Proper Use of Restriction & Exclusion
- 5. Clean-up of Vomiting and Diarrheal Events

IN	OUT	N/O	N/A	COS	REPEAT
<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>
<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>
<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>
<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>

**Good Hygienic Practices**

- 6A. Proper eating, tasting, drinking, or tobacco use
- 6B. Preventing contamination when tasting

IN	OUT	N/O	N/A	COS	REPEAT
<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>
<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>

*Assan*

Inspector

Acknowledged Receipt : Tim Viveiros

Page 1 of 7

## Food Establishment Inspection Report - FDA

Good Hygienic Practices	IN	OUT	N/O	N/A	COS	REPEAT
7. No discharge from eyes, nose, and mouth	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>
Control of Hands as a Vehicle of Contamination	IN	OUT	N/O	N/A	COS	REPEAT
8A. Hands clean & properly washed	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>
8B. Where to wash, hand antiseptics	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>
9. No bare hand contact with RTE food or a pre-approved alternative procedure properly allowed	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
10A. Adequate handwashing sinks properly supplied and accessible	<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>
10B. Handwashing sinks accessible with proper signage, handwashing aids	<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>
Approved Sources	IN	OUT	N/O	N/A	COS	REPEAT
11A. Milk, eggs, juice, bottled water, hermetically sealed food, game animals	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
11B. Packaged foods, labeling, whole muscle beef	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
11C. Obtaining raw fish, packaged meat & poultry, eggs	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
12A. Food received at proper temperature	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
12B. Shipping and receiving frozen food	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
13. Food in good condition, honestly presented, safe, & unadulterated	<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>
13B. Food package integrity	<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>
14A. Required records available: shellstock tags, parasite destruction	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
14B. Missing shellstock tags, destruction	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
14C. Parasite destruction- storing raw/partially cooked fish	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
Protection from Contamination	IN	OUT	N/O	N/A	COS	REPEAT
15A. Food separated & protected	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
15B. Cleaning equip/utensils/food containers	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
16A. Food-contact surfaces: cleaned & sanitized immersion 171° F and above	<input type="radio"/>	<input checked="" type="radio"/>		<input type="radio"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
<div style="display: flex; align-items: flex-start;"> <div style="border-right: 1px solid black; padding-right: 10px; margin-right: 10px;"> <b>Fail Notes</b> </div> <div> <b>4-501.114 (A-E, F 1&amp;2)</b> </div> <div> <i>Chemical Sanitization - Temperature, pH, Concentration and Hardness [The concentration of the sanitizing solution in the red buckets was strong (&gt;500ppm). A chemical sanitizer used in a sanitizing solution for a manual or mechanical operation shall be used in accordance with the manufacturer's instructions label. The PIC corrected this violation during the inspection.]</i> </div> </div>						
16B. Food contact surfaces cleaned and sanitized NMT 194° F, NLT 180° F	<input checked="" type="radio"/>	<input type="radio"/>		<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
16C. Mechanical warewashing equipment sanitization food contact surfaces, equip., utensils	<input checked="" type="radio"/>	<input type="radio"/>		<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
17. Proper disposition of returned, previously served reconditions, & unsafe food	<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>
Time/Temperature Control for Safety Food (TCS Food)	IN	OUT	N/O	N/A	COS	REPEAT
18A. Proper cooking time & temperatures	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

Inspector

Acknowledged Receipt : Tim Viveiros

Page 2 of 7

## Food Establishment Inspection Report - FDA

Time/Temperature Control for Safety Food (TCS Food)			IN	OUT	N/O	N/A	COS	REPEAT
18B. Whole meat cooking and serving, storing			<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
18C. Microwave cooking of raw animal foods			<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
19. Proper reheating procedures for hot holding			<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
20. Proper cooling time & temperatures			<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
21. Proper hot holding temperatures			<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
<div style="border: 1px solid black; padding: 2px; margin-bottom: 5px;">Fail Notes</div> <div>                     3-501.16 (A) <i>*Hot TCS foods Maintained at or Above 135oF, Also for whole meat roasts (130F and above) [The TCS (time/temperature control for safety) food (chicken nuggets) in the hot holding unit was observed to have a temperature range of 122.2 to 135.3 degrees F. TCS foods for hot holding shall be maintained at a temperature of 135 degrees F or above.]</i> </div>								
22. Proper cold holding temperatures			<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
23. Proper Date Marking			<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
23B. TCS Foods Disposition			<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
24A. Time as a public health control: procedures			<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
24B. Time as a public health control: temperatures & discarding food			<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
24C. Time as a public health control: highly susceptible population (HSP)			<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
Consumer Advisory			IN	OUT	N/O	N/A	COS	REPEAT
25. Consumer advisory provided for raw or undercooked foods			<input type="radio"/>	<input type="radio"/>		<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
Highly Susceptible Populations (HSP)			IN	OUT	N/O	N/A	COS	REPEAT
26A. Pasteurized foods used; prohibited foods not offered			<input type="radio"/>	<input type="radio"/>		<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
26B. Reservice of foods			<input type="radio"/>	<input type="radio"/>		<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
Chemical			IN	OUT	N/O	N/A	COS	REPEAT
27. Food additives: approved and properly used			<input type="radio"/>	<input type="radio"/>		<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
28A. Toxic substances identified, stored and used			<input checked="" type="radio"/>	<input type="radio"/>		<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
28B. Poisonous materials, sanitizers, additives, medicines restriction, separation, storage			<input checked="" type="radio"/>	<input type="radio"/>		<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
28C. Conditions of Use: law			<input checked="" type="radio"/>	<input type="radio"/>		<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
Conformance with Approved Procedures			IN	OUT	N/O	N/A	COS	REPEAT
29A. Compliance with variance, specialized process, & HACCP plan			<input type="radio"/>	<input type="radio"/>		<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
29B. Treating juice- HACCP, reduced oxygen packaging w/out variance, conformance with approved procedures			<input type="radio"/>	<input type="radio"/>		<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
29C. When HACCP plan is required			<input type="radio"/>	<input type="radio"/>		<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

*Asson*

Inspector

Acknowledged Receipt : Tim Viveiros

Page 3 of 7

## Food Establishment Inspection Report - FDA

### GOOD RETAIL PRACTICES

Good Retail Practices are preventative measures to control the addition of pathogens, chemicals, and physical objects into foods.

IN = In compliance OUT = not in compliance COS - corrected on -site during inspection REPEAT = repeat violation

#### Safe Food and Water

	IN	OUT	N/O	N/A	COS	REPEAT
30. Pasteurized eggs used where required	<input type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>
31A. Water & ice from approved source	<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>
31B. Sampling, alternative water supply	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>	
31C. Sampling report	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>	
32. Variance obtained for specialized processing methods	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>	

#### Food Temperature Control

	IN	OUT	N/O	N/A	COS	REPEAT
33A. Proper cooling methods used; adequate equipment for temperature control	<input type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>
33B. Frozen food	<input type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>
34. Plant food properly cooked for hot holding	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
35. Approved thawing methods used	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
36A. Thermometers provided and accurate	<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>
36B. Thermometers function properly	<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>

#### Food Identification

	IN	OUT	COS	REPEAT
37A. Food properly labeled; original container	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
37B. Food labels, labeling of ingredients	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

#### Prevention of Food Contamination

38A. Insects, rodents, & animals not present	<input type="radio"/>	<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
<b><i>This item has Notes. See Footnote 1 at end of questionnaire.</i></b>				
38B. Handling prohibition, controlling pests, prohibiting animals	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
39A. Contamination prevented during food storage	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
39B. Food display; ice used as an exterior coolant prohibited as an ingredient	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
39C. Consumer self-service operations- utensils and monitoring	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
40A. Personal cleanliness- prohibition jewelry	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
40B. Maintenance of fingernails	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
41. Wiping cloths; properly used and stored	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
42A. Washing Produce - following chemical manufacturers label	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
42B. Washing produce	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
42C. Washing produce- chemicals	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

#### Proper Use of Utensils

IN OUT COS REPEAT

Inspector

Acknowledged Receipt : Tim Viveiros

Page 4 of 7

## Food Establishment Inspection Report - FDA

### Proper Use of Utensils

	IN	OUT	COS	REPEAT
43. In-use utensils; properly stored	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
44. Utensils, equipment & linens; properly stored, dried, and handled	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
45A. Single-use/ single service articles properly stored and used, required	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
45B. Single-use/service articles use limitation, kitchenware and tableware preventing contamination	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
46. Gloves used properly	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

### Utensils, Equipment and Vending

	IN	OUT	COS	REPEAT
47A. Food & non-food contact surfaces cleanable	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
47B. Food contact surfaces /utensils cleanability, molluscan shellfish tanks, consumer self-service	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
47C. Properly designed characteristics: food and non-food contact surfaces, molluscan shellfish tanks	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
48A. Warewashing facilities: installed, maintained, & used; test strips	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
48B. Operational warewashing machines	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
49. Non-food contact surfaces clean	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

### Physical Facilities

	IN	OUT	N/A	COS	REPEAT
50. Hot & cold water available; adequate pressure	<input checked="" type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>
51A. Plumbing installed; proper backflow devices	<input checked="" type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>
51B. Prohibiting a cross-connection, inspection and servicing system	<input checked="" type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>
51C. Approved system and cleanable fixtures, service sink	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
52A. Sewage and waste water properly disposed	<input checked="" type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>
52B. Grease traps easily accessible for cleaning	<input checked="" type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>
52C. Removing mobile food establishment waste	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
53A. Toilet facilities; properly constructed, supplied, & cleaned	<input checked="" type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>
53B. Toilet tissue availability	<input checked="" type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>
54. Garbage & refuse properly disposed; facilities maintained	<input type="radio"/>	<input checked="" type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>
<div style="display: flex; align-items: flex-start;"> <div style="border-right: 1px solid black; padding-right: 10px; margin-right: 10px;"> <i>Fail Notes</i> </div> <div> 5-501.13    <i>Receptacles</i>  [There was no receptacle next to the wash hand sink. Provide a small receptacle next to the wash hand sink.] </div> </div>					
55A. Physical facilities installed, maintained, & clean	<input checked="" type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>
55B. Private homes and living or sleeping quarters, use prohibition	<input checked="" type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>
56. Adequate ventilation & lighting; designated areas used	<input checked="" type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>

### MASSACHUSETTS ONLY REGULATIONS

Rules and Regulations adopted for use in Massachusetts only.

#### Facilities

	IN	OUT	COS	REPEAT
57A. Catering	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

Inspector

Acknowledged Receipt : Tim Viveiros

Page 5 of 7

## Food Establishment Inspection Report - FDA

### Facilities

- 57B. When plans are reviewed, prerequisite for operations- valid permit
- 57C. Contents of plans and specifications, preoperational inspections
- 58. Mobile Food Operations
- 59. Temporary Food Establishments
- 60. Residential Kitchens

IN   OUT   COS   REPEAT

<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

### Procedures

- 61. Anti-choking Procedures
- 62. Tobacco Products: Notice and Sale
- 63. Food Allergy Awareness Requirements

IN   OUT   COS   REPEAT

<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

*Asson*

Inspector

Acknowledged Receipt : Tim Viveiros

Page 6 of 7

## Food Establishment Inspection Report - FDA

### Footnote 1

#### **Notes:**

One of the windows was open at the time of inspection, which did not have a mesh screen fitted to it. Fortunately, the weather was cold at the time of the inspection. However, there is another openable window which is fitted with a mesh screen. It is advisable that the window fitted with the mesh screen is opened during hot weather to protect against the entry of flying pests.

  
Inspector

Acknowledged Receipt : Tim Viveiros

Page 7 of 7



**City of Newton**  
**Health and Human Services**  
 Deborah Youngblood, PhD, Commissioner  
 1000 Commonwealth Ave Newton, MA 02459  
 (617) 796-1420



**Public Health**  
 Prevent. Promote. Protect.

**Food Establishment Inspection Report - FDA**

**Insp Date:** 3/17/2017    **Business ID:** 1N2149  
**Business:** FA Day Middle School  
 21 Minot Pl.

Newton, MA 02460

**Inspection:** CN000309  
**Section:** 4  
**Phone:** 559-9100  
**Inspector:** RS764 John McNally  
**Reason:** 1-Routine  
**Results:** Follow-up R2

**Inspection Summary**

Official Order for Correction: Based on an inspection today, the items checked indicate violations of 105 CMR 590.000/ 2013 Federal Food Code. This report, when signed below by the Commissioner of Health / Agent constitutes an order by the Commissioner of Health. Failure to correct violations cited in this report may result in suspension or revocation of the food establishment permit and cessation of food establishment operations. If aggrieved by this order, you have the right to a hearing. The request must be in writing and submitted to the Commissioner of Health at the above address within 10 days of receipt of this order.

Est. Type 1 - Food Svc Establish License/Permit # \_\_\_\_\_ Risk Category 02 Risk Level Observed 02 Low

Foodborne Illness Complaint Investigated (All) ☐ Involving More Than Two Persons ☐

**FOODBORNE ILLNESS RISK FACTORS AND PUBLIC HEALTH INTERVENTIONS**

Compliance status: IN = in compliance OUT = not in compliance N/O = not observed N/A = not applicable

Marked in appropriate box for COS and/or R. COS = corrected on-site during inspection R = repeat violation

Risk factors are improper practices or procedures identified as the most prevalent contributing factors of foodborne illness or injury. Public Health Interventions are control measures to prevent foodborne illnesses or injury.

**Supervision**

1. PIC Present, Knowledge and Duties
2. Certified Food Protection Manager

IN	OUT	N/O	N/A	COS	REPEAT
⊙	○			□	□
⊙	○		○	□	□

**Employee Health / Responding to Contamination Events**

- 3A. Employee Health: PIC Knowledge, Responsibilities & Reporting
- 3B. Employee Reporting to PIC
4. Proper Use of Restriction & Exclusion
5. Clean-up of Vomiting and Diarrheal Events

IN	OUT	N/O	N/A	COS	REPEAT
⊙	○			□	□
○	○			□	□
○	○			□	□
○	○			□	□

**Good Hygienic Practices**

- 6A. Proper eating, tasting, drinking, or tobacco use
- 6B. Preventing contamination when tasting

IN	OUT	N/O	N/A	COS	REPEAT
⊙	○	○		□	□
⊙	○	○		□	□

*John McNally RS*

Inspector

Acknowledged Receipt : REGINA DELLOSSO

Page 1 of 6

## Food Establishment Inspection Report - FDA

### Good Hygienic Practices

7. No discharge from eyes, nose, and mouth

IN	OUT	N/O	N/A	COS	REPEAT
<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>

### Control of Hands as a Vehicle of Contamination

8A. Hands clean & properly washed

IN	OUT	N/O	N/A	COS	REPEAT
<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>

8B. Where to wash, hand antiseptics

IN	OUT	N/O	N/A	COS	REPEAT
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>

9. No bare hand contact with RTE food or a pre-approved alternative procedure properly allowed

IN	OUT	N/O	N/A	COS	REPEAT
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

10A. Adequate handwashing sinks properly supplied and accessible

IN	OUT	N/O	N/A	COS	REPEAT
<input type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>

10B. Handwashing sinks accessible with proper signage, handwashing aids

IN	OUT	N/O	N/A	COS	REPEAT
<input type="radio"/>	<input checked="" type="radio"/>			<input checked="" type="checkbox"/>	<input type="checkbox"/>

*Fail Notes* | 6-301.14 *Handwashing signage*  
*[there were signs posted at the food prep sink and the 3-bay sink for handwashing. These sinks are not permitted to be used for handwashing. Signs were removed.]*

### Approved Sources

11A. Milk, eggs, juice, bottled water, hermetically sealed food, game animals

IN	OUT	N/O	N/A	COS	REPEAT
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

11B. Packaged foods, labeling, whole muscle beef

IN	OUT	N/O	N/A	COS	REPEAT
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

11C. Obtaining raw fish, packaged meat & poultry, eggs

IN	OUT	N/O	N/A	COS	REPEAT
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

12A. Food received at proper temperature

IN	OUT	N/O	N/A	COS	REPEAT
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

12B. Shipping and receiving frozen food

IN	OUT	N/O	N/A	COS	REPEAT
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

13. Food in good condition, honestly presented, safe, & unadulterated

IN	OUT	N/O	N/A	COS	REPEAT
<input type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>

13B. Food package integrity

IN	OUT	N/O	N/A	COS	REPEAT
<input type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>

14A. Required records available: shellstock tags, parasite destruction

IN	OUT	N/O	N/A	COS	REPEAT
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

14B. Missing shellstock tags, destruction

IN	OUT	N/O	N/A	COS	REPEAT
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

14C. Parasite destruction- storing raw/partially cooked fish

IN	OUT	N/O	N/A	COS	REPEAT
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

### Protection from Contamination

15A. Food separated & protected

IN	OUT	N/O	N/A	COS	REPEAT
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

15B. Cleaning equip/utensils/food containers

IN	OUT	N/O	N/A	COS	REPEAT
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

16A. Food-contact surfaces: cleaned & sanitized immersion 171° F and above

IN	OUT	N/O	N/A	COS	REPEAT
<input type="radio"/>	<input checked="" type="radio"/>		<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

*Fail Notes* | 4-602.11 (A & C) *Equipment and food contact surfaces cleaned*  
*[food contact surfaces not being cleaned before applying sanitizer. Wash all surfaces before applying sanitizer.]*

16B. Food contact surfaces cleaned and sanitized NMT 194° F, NLT 180° F

IN	OUT	N/O	N/A	COS	REPEAT
<input type="radio"/>	<input type="radio"/>		<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

16C. Mechanical warewashing equipment sanitization food contact surfaces, equip., utensils

IN	OUT	N/O	N/A	COS	REPEAT
<input type="radio"/>	<input type="radio"/>		<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

17. Proper disposition of returned, previously served reconditions, & unsafe food

IN	OUT	N/O	N/A	COS	REPEAT
<input type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>

### Time/Temperature Control for Safety Food (TCS Food)

18A. Proper cooking time & temperatures

IN	OUT	N/O	N/A	COS	REPEAT
<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

*John J. Kelly R5*

Inspector

Acknowledged Receipt : REGINA DELLOSSO

Page 2 of 6

## Food Establishment Inspection Report - FDA

Time/Temperature Control for Safety Food (TCS Food)	IN	OUT	N/O	N/A	COS	REPEAT
18B. Whole meat cooking and serving, storing	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
18C. Microwave cooking of raw animal foods	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
19. Proper reheating procedures for hot holding	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
20. Proper cooling time & temperatures	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
21. Proper hot holding temperatures	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
<div style="display: flex; border-left: 1px solid black; padding-left: 10px;"> <div style="width: 15%; font-weight: bold; margin-bottom: 5px;">Fail Notes</div> <div> <div style="display: flex; border-bottom: 1px solid black; margin-bottom: 5px;"> <div style="width: 15%; font-weight: bold;">3-501.16 (A)</div> <div> <i>*Hot TCS foods Maintained at or Above 135oF, Also for whole meat roasts (130F and above) [hot holding slider shelves holding food at 110 to 130F. Minimum requirement is 135F. Hot hlding box had some food items at less than required 135F. Water tray for humidity not being used. It appears that this operation needs a second hot holding unit to provide safe holding for hot foods.]</i> </div> </div> </div> </div>						
22. Proper cold holding temperatures	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
<div style="display: flex; border-left: 1px solid black; padding-left: 10px;"> <div style="width: 15%; font-weight: bold; margin-bottom: 5px;">Fail Notes</div> <div> <div style="display: flex; border-bottom: 1px solid black; margin-bottom: 5px;"> <div style="width: 15%; font-weight: bold;">3-501.16(A2 &amp;B)</div> <div> <i>*Cold PHFs Maintained at or Below 41oF- also pertains to untreated eggs (45F) [cold holding cart for salads and wraps had food temperatures at 55 to 63F. Minimum requirement is 41F. Walk-in refrigerator temperature of food was slightly elevated .[42 to 43F.]</i> </div> </div> </div> </div>						
23. Proper Date Marking	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
23B. TCS Foods Disposition	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
24A. Time as a public health control: procedures	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
24B. Time as a public health control: temperatures & discarding food	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
24C. Time as a public health control: highly susceptible population (HSP)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
Consumer Advisory	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
25. Consumer advisory provided for raw or undercooked foods	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
Highly Susceptible Populations (HSP)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
26A. Pasteurized foods used; prohibited foods not offered	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
26B. Reservice of foods	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
Chemical	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
27. Food additives: approved and properly used	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
28A. Toxic substances identified, stored and used	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
<div style="display: flex; border-left: 1px solid black; padding-left: 10px;"> <div style="width: 15%; font-weight: bold; margin-bottom: 5px;">Fail Notes</div> <div> <div style="display: flex; border-bottom: 1px solid black; margin-bottom: 5px;"> <div style="width: 15%; font-weight: bold;">7-202.12 (C)</div> <div> <i>Conditions of Use: Restricted use pesticide [sanitizer bucket too strong of a concentration-stay within parameters 150 to 400 PPM.]</i> </div> </div> </div> </div>						
28B. Poisonous materials, sanitizers, additives, medicines restriction, separation, storage	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
28C. Conditions of Use: law	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
Conformance with Approved Procedures	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
29A. Compliance with variance, specialized process, & HACCP plan	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

*John J. Kelly, R5*

Inspector

Acknowledged Receipt : REGINA DELLOSSO

Page 3 of 6

## Food Establishment Inspection Report - FDA

### Conformance with Approved Procedures

29B. Treating juice- HACCP, reduced oxygen packaging w/out variance, conformance with approved procedures

IN OUT N/O N/A COS REPEAT

☐ ☐ ☒ ☐ ☐

29C. When HACCP plan is required

☐ ☐ ☒ ☐ ☐

### GOOD RETAIL PRACTICES

Good Retail Practices are preventative measures to control the addition of pathogens, chemicals, and physical objects into foods.

IN = In compliance OUT = not in compliance COS - corrected on -site during inspection REPEAT = repeat violation

### Safe Food and Water

30. Pasteurized eggs used where required

IN OUT N/O N/A COS REPEAT

☒ ☐ ☐ ☐ ☐ ☐

31A. Water & ice from approved source

☒ ☐ ☐ ☐ ☐ ☐

31B. Sampling, alternative water supply

☐ ☐ ☐ ☒ ☐ ☐

31C. Sampling report

☐ ☐ ☐ ☒ ☐ ☐

32. Variance obtained for specialized processing methods

☐ ☐ ☐ ☒ ☐ ☐

### Food Temperature Control

33A. Proper cooling methods used; adequate equipment for temperature control

IN OUT N/O N/A COS REPEAT

☒ ☐ ☐ ☐ ☐ ☐

33B. Frozen food

☒ ☐ ☐ ☐ ☐ ☐

34. Plant food properly cooked for hot holding

☒ ☐ ☐ ☐ ☐ ☐

35. Approved thawing methods used

☒ ☐ ☐ ☐ ☐ ☐

36A. Thermometers provided and accurate

☒ ☐ ☐ ☐ ☐ ☐

36B. Thermometers function properly

☒ ☐ ☐ ☐ ☐ ☐

### Food Identification

37A. Food properly labeled; original container

IN OUT COS REPEAT

☒ ☐ ☐ ☐

37B. Food labels, labeling of ingredients

☐ ☒ ☐ ☐

Fail Notes | 3-602.11 (B5) \*Labeling of major food allergen  
[yogurt and pudding assembled on site did not have ingredient labels.]

### Prevention of Food Contamination

38A. Insects, rodents, & animals not present

IN OUT COS REPEAT

☒ ☐ ☐ ☐

38B. Handling prohibition, controlling pests, prohibiting animals

☒ ☐ ☐ ☐

39A. Contamination prevented during food storage

☒ ☐ ☐ ☐

39B. Food display; ice used as an exterior coolant prohibited as an ingredient

☐ ☒ ☐ ☐

Fail Notes | 3-306.11 Food Display-Preventing Contamination by Consumers  
[slider display has food unwrapped and unprotected [chicken cutlets and FF]]

39C. Consumer self-service operations- utensils and monitoring

☐ ☒ ☐ ☐

40A. Personal cleanliness- prohibition jewelry

☒ ☐ ☐ ☐

*John J. Kelly RS*

Inspector

Acknowledged Receipt : REGINA DELLOSSO

Page 4 of 6

## Food Establishment Inspection Report - FDA

Prevention of Food Contamination		IN	OUT	COS	REPEAT	
40B. Maintenance of fingernails		<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>	
41. Wiping cloths; properly used and stored		<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>	
42A. Washing Produce - following chemical manufacturers label		<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>	
42B. Washing produce		<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>	
42C. Washing produce- chemicals		<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Proper Use of Utensils		IN	OUT	COS	REPEAT	
43. In-use utensils; properly stored		<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>	
44. Utensils, equipment & linens; properly stored, dried, and handled		<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>	
45A. Single-use/ single service articles properly stored and used, required		<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>	
45B. Single-use/service articles use limitation, kitchenware and tableware preventing contamination		<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>	
46. Gloves used properly		<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Utensils, Equipment and Vending		IN	OUT	COS	REPEAT	
47A. Food & non-food contact surfaces cleanable		<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>	
47B. Food contact surfaces /utensils cleanability, molluscan shellfish tanks, consumer self-service		<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>	
47C. Properly designed characteristics: food and non-food contact surfaces, molluscan shellfish tanks		<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>	
48A. Warewashing facilities: installed, maintained, & used; test strips		<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>	
48B. Operational warewashing machines		<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>	
49. Non-food contact surfaces clean		<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Physical Facilities		IN	OUT	N/A	COS	REPEAT
50. Hot & cold water available; adequate pressure		<input checked="" type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>
51A. Plumbing installed; proper backflow devices		<input type="radio"/>	<input checked="" type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>
Fail Notes	5-202.13 <i>*Backflow Prevention, Air Gap [FOOD PREP SINK HAS A DIRECT WASTE CONNECTION. Provide an air gap for this drain.]</i>					
51B. Prohibiting a cross-connection, inspection and servicing system		<input type="radio"/>	<input checked="" type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>
Fail Notes	5-205.12 (B) <i>Prohibiting a cross-connection, non-drinking water [hose connected above 3-bay sink. Line does not have a backflow device.]</i>					
51C. Approved system and cleanable fixtures, service sink		<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
52A. Sewage and waste water properly disposed		<input checked="" type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>
52B. Grease traps easily accessible for cleaning		<input checked="" type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>
52C. Removing mobile food establishment waste		<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
53A. Toilet facilities; properly constructed, supplied, & cleaned		<input checked="" type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>
53B. Toilet tissue availability		<input checked="" type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>

*John P. Kelly, R-5*

Inspector

Acknowledged Receipt : REGINA DELLOSSO

Page 5 of 6

## Food Establishment Inspection Report - FDA

### Physical Facilities

	IN	OUT	N/A	COS	REPEAT
54. Garbage & refuse properly disposed; facilities maintained	<input checked="" type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>
55A. Physical facilities installed, maintained, & clean	<input checked="" type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>
55B. Private homes and living or sleeping quarters, use prohibition	<input type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>
56. Adequate ventilation & lighting; designated areas used	<input checked="" type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>

### MASSACHUSETTS ONLY REGULATIONS

Rules and Regulations adopted for use in Massachusetts only.

#### Facilities

	IN	OUT	COS	REPEAT
57A. Catering	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
57B. When plans are reviewed, prerequisite for operations- valid permit	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
57C. Contents of plans and specifications, preoperational inspections	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
58. Mobile Food Operations	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
59. Temporary Food Establishments	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
60. Residential Kitchens	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

#### Procedures

	IN	OUT	COS	REPEAT
61. Anti-choking Procedures	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
62. Tobacco Products: Notice and Sale	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
63. Food Allergy Awareness Requirements	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

*John J. Nally, R.S.*

Inspector

Acknowledged Receipt : REGINA DELLOSSO

Page 6 of 6



**City of Newton**  
**Health and Human Services**  
 Deborah Youngblood, PhD, Commissioner  
 1000 Commonwealth Ave Newton, MA 02459  
 (617) 796-1420



**Public Health**  
 Prevent. Promote. Protect.

**Food Establishment Inspection Report - FDA**

**Insp Date:** 10/17/2017    **Business ID:** 1N2149  
**Business:** FA Day Middle School  
 21 Minot Pl.

Newton, MA 02460

**Inspection:** CN000352  
**Section:** 4  
**Phone:** 559-9100  
**Inspector:** 1N1121 Derek Kwok  
**Reason:** 1-Routine  
**Results:** No Follow-up R2

**Inspection Summary**

Official Order for Correction: Based on an inspection today, the items checked indicate violations of 105 CMR 590.000/ 2013 Federal Food Code. This report, when signed below by the Commissioner of Health / Agent constitutes an order by the Commissioner of Health. Failure to correct violations cited in this report may result in suspension or revocation of the food establishment permit and cessation of food establishment operations. If aggrieved by this order, you have the right to a hearing. The request must be in writing and submitted to the Commissioner of Health at the above address within 10 days of receipt of this order.

Est. Type 1 - Food Svc Establis License/Permit # \_\_\_\_\_ Risk Category 02 Risk Level Observed 02 Low

Foodborne Illness Complaint Investigated (All) ☐ Involving More Than Two Persons ☐

**FOODBORNE ILLNESS RISK FACTORS AND PUBLIC HEALTH INTERVENTIONS**

Compliance status: IN = in compliance OUT = not in compliance N/O = not observed N/A = not applicable

Marked in appropriate box for COS and/or R. COS = corrected on-site during inspection R = repeat violation

Risk factors are improper practices or procedures identified as the most prevalent contributing factors of foodborne illness or injury. Public Health Interventions are control measures to prevent foodborne illnesses or injury.

**Supervision**

1. PIC Present, Knowledge and Duties
2. Certified Food Protection Manager

IN	OUT	N/O	N/A	COS	REPEAT
<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>
<input checked="" type="radio"/>	<input type="radio"/>		<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

**Employee Health / Responding to Contamination Events**

- 3A. Employee Health: PIC Knowledge, Responsibilities & Reporting
- 3B. Employee Reporting to PIC
4. Proper Use of Restriction & Exclusion
5. Clean-up of Vomiting and Diarrheal Events

IN	OUT	N/O	N/A	COS	REPEAT
<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>
<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>
<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>
<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>

**Good Hygienic Practices**

- 6A. Proper eating, tasting, drinking, or tobacco use
- 6B. Preventing contamination when tasting

IN	OUT	N/O	N/A	COS	REPEAT
<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>
<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>

*Derek Kwok*

Inspector

Acknowledged Receipt :

Page 1 of 8

## Food Establishment Inspection Report - FDA

### Good Hygienic Practices

7. No discharge from eyes, nose, and mouth

IN	OUT	N/O	N/A	COS	REPEAT
<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>

### Control of Hands as a Vehicle of Contamination

8A. Hands clean & properly washed

IN	OUT	N/O	N/A	COS	REPEAT
<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>

8B. Where to wash, hand antiseptics

IN	OUT	N/O	N/A	COS	REPEAT
<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>

*Fail Notes*    2-301.15    *Where to wash*  
*[An employee was observed washing her hands at the 3-bay sink. Food employees shall clean their hands in a handwashing sink and may not clean their hands in a sink used for food preparation or ware washing, or in a service sink or a curbed cleaning facility used for the disposal of mop water and similar liquid waste.]*

9. No bare hand contact with RTE food or a pre-approved alternative procedure properly allowed

IN	OUT	N/O	N/A	COS	REPEAT
<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

10A. Adequate handwashing sinks properly supplied and accessible

IN	OUT	N/O	N/A	COS	REPEAT
<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>

10B. Handwashing sinks accessible with proper signage, handwashing aids

IN	OUT	N/O	N/A	COS	REPEAT
<input type="radio"/>	<input checked="" type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>

*Fail Notes*    6-301.14    *Handwashing signage*  
*[A sign or poster was not observed at the hand sink. A sign or poster that notifies food employees to wash their hands shall be provided at all Handwashing Sinks used by food employees and shall be clearly visible to food employees. Post a sign or poster.]*

### Approved Sources

11A. Milk, eggs, juice, bottled water, hermetically sealed food, game animals

IN	OUT	N/O	N/A	COS	REPEAT
<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

11B. Packaged foods, labeling, whole muscle beef

IN	OUT	N/O	N/A	COS	REPEAT
<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

11C. Obtaining raw fish, packaged meat & poultry, eggs

IN	OUT	N/O	N/A	COS	REPEAT
<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

12A. Food received at proper temperature

IN	OUT	N/O	N/A	COS	REPEAT
<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

12B. Shipping and receiving frozen food

IN	OUT	N/O	N/A	COS	REPEAT
<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

13. Food in good condition, honestly presented, safe, & unadulterated

IN	OUT	N/O	N/A	COS	REPEAT
<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>

13B. Food package integrity

IN	OUT	N/O	N/A	COS	REPEAT
<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>

14A. Required records available: shellstock tags, parasite destruction

IN	OUT	N/O	N/A	COS	REPEAT
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

14B. Missing shellstock tags, destruction

IN	OUT	N/O	N/A	COS	REPEAT
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

14C. Parasite destruction- storing raw/partially cooked fish

IN	OUT	N/O	N/A	COS	REPEAT
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

### Protection from Contamination

15A. Food separated & protected

IN	OUT	N/O	N/A	COS	REPEAT
<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

15B. Cleaning equip/utensils/food containers

IN	OUT	N/O	N/A	COS	REPEAT
<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

16A. Food-contact surfaces: cleaned & sanitized immersion 171° F and above

IN	OUT	N/O	N/A	COS	REPEAT
<input type="radio"/>	<input checked="" type="radio"/>		<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

*David Thiel*

Inspector

Acknowledged Receipt :

Page 2 of 8

# Food Establishment Inspection Report - FDA

## Protection from Contamination

IN OUT N/O N/A COS REPEAT

**Fail Notes** 4-501.114 (A-E, F 1&2) *Chemical Sanitization - Temperature, pH, Concentration and Hardness*  
*[The sanitizer in all of the red buckets were too low. A chemical sanitizer used in a sanitizing solution for a manual or mechanical operation shall be used in accordance with the EPA registered label use instructions.]*

16B. Food contact surfaces cleaned and sanitized NMT 194° F, NLT 180° F ☐ ☒ ☐ ☐ ☐

**Fail Notes** 4-601.11 (A) *\*Equipment, Food-Contact Surfaces, and Utensils Clean*  
*[There were a couple of cleaned pieces of food equipment in storage that had some food debris on them. Equipment food-contact surfaces and utensils shall be clean to sight and touch. Food contact surfaces shall be cleaned to remove organic matter so that sanitization can occur. ]*

16C. Mechanical warewashing equipment sanitization food contact surfaces, equip., utensils ☒ ☐ ☐ ☐ ☐

17. Proper disposition of returned, previously served reconditions, & unsafe food ☒ ☐ ☐ ☐

## Time/Temperature Control for Safety Food (TCS Food)

IN OUT N/O N/A COS REPEAT

18A. Proper cooking time & temperatures ☒ ☐ ☐ ☐ ☐ ☐

18B. Whole meat cooking and serving, storing ☐ ☐ ☐ ☒ ☐ ☐

18C. Microwave cooking of raw animal foods ☐ ☐ ☐ ☒ ☐ ☐

19. Proper reheating procedures for hot holding ☒ ☐ ☐ ☐ ☐ ☐

20. Proper cooling time & temperatures ☒ ☐ ☐ ☐ ☐ ☐

21. Proper hot holding temperatures ☐ ☒ ☐ ☐ ☐ ☒

**Fail Notes** 3-501.16 (A) *\*Hot TCS foods Maintained at or Above 135oF, Also for whole meat roasts (130F and above)*  
*[The hot holding unit for the burgers and hot dogs had temps between 115-120°F. The mac and cheese was around 118°F. Except during preparation, cooking, or cooling, or when time is used as the public health control, TCS (Time / Temperature Control for Safety Food) Food shall be maintained at 135°F or above.]*

22. Proper cold holding temperatures ☐ ☒ ☐ ☐ ☐ ☒

**Fail Notes** 3-501.16(A2 &B) *\*Cold PHFs Maintained at or Below 41oF- also pertains to untreated eggs (45F)*  
*[The following TCS (Time / Temperature Control for Safety Food) foods had the following internal temperatures: Salad area- salad 47.2°F, italian sub 48.2°F, salad dressing 45°F.*

*Maintain the internal temperature of TCS Foods at 41°F and below.]*

23. Proper Date Marking ☒ ☐ ☐ ☐ ☐ ☐

23B. TCS Foods Disposition ☒ ☐ ☐ ☐ ☐ ☐

24A. Time as a public health control: procedures ☐ ☐ ☐ ☒ ☐ ☐

*Donal Kneel*

Inspector

Acknowledged Receipt :

Page 3 of 8

## Food Establishment Inspection Report - FDA

### Time/Temperature Control for Safety Food (TCS Food)

	IN	OUT	N/O	N/A	COS	REPEAT
24B. Time as a public health control: temperatures & discarding food	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
24C. Time as a public health control: highly susceptible population (HSP)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

### Consumer Advisory

25. Consumer advisory provided for raw or undercooked foods	<input type="radio"/>	<input type="radio"/>		<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
---	-----------------------	-----------------------	--	----------------------------------	--------------------------	--------------------------

### Highly Susceptible Populations (HSP)

26A. Pasteurized foods used; prohibited foods not offered	<input type="radio"/>	<input type="radio"/>		<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
26B. Reservice of foods	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

### Chemical

27. Food additives: approved and properly used	<input type="radio"/>	<input type="radio"/>		<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
28A. Toxic substances identified, stored and used	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

Fail Notes	7-101.11	<p><i>*Identifying Information - Original Containers, manufacturers label on container</i></p> <p><i>[There was an unlabeled chemical spray bottle by the back chemical storage area. Working containers used for storing chemicals such as cleaners and sanitizers taken from bulk supplies shall be clearly and individually identified with the common name of the material. Label all containers / spray bottles. Be sure the chemical in the bottle matches the name on the working container (bottle).]</i></p>
------------	----------	---

28B. Poisonous materials, sanitizers, additives, medicines restriction, separation, storage	<input checked="" type="radio"/>	<input type="radio"/>		<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
28C. Conditions of Use: law	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

### Conformance with Approved Procedures

29A. Compliance with variance, specialized process, & HACCP plan	<input type="radio"/>	<input type="radio"/>		<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
29B. Treating juice- HACCP, reduced oxygen packaging w/out variance, conformance with approved procedures	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
29C. When HACCP plan is required	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

### GOOD RETAIL PRACTICES

Good Retail Practices are preventative measures to control the addition of pathogens, chemicals, and physical objects into foods.

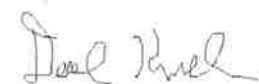
IN = In compliance    OUT = not in compliance    COS - corrected on -site during inspection    REPEAT = repeat violation

### Safe Food and Water

30. Pasteurized eggs used where required	<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>
31A. Water & ice from approved source	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
31B. Sampling, alternative water supply	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
31C. Sampling report	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
32. Variance obtained for specialized processing methods	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

### Food Temperature Control

	IN	OUT	N/O	N/A	COS	REPEAT
--	----	-----	-----	-----	-----	--------



Inspector

Acknowledged Receipt :

Page 4 of 8

# Food Establishment Inspection Report - FDA

## Food Temperature Control

IN OUT N/O N/A COS REPEAT

33A. Proper cooling methods used; adequate equipment for temperature control

☐ ☒ ☐ ☐

### Fail Notes

3-501.15 (A)

#### Cooling Methods for TCS foods

[Chicken and pasta were observed cooling in the walkin, but both containers were covered. Keep on a top shelf and uncovered. When cooling foods, use one or more of the following acceptable methods based on the type of food being cooled: 1) Place food in shallow pans; 2) Separate food into smaller or thinner portions; 3) Use rapid cooling equipment such ice wands, blast chillers; 4) Stir the food in a container placed in an ice water bath; 5) Use containers that facilitates the heat transfer; 6) Add ice as an ingredient, or other effective methods. Arrange the food in the equipment to provide maximum heat transfer through the container walls. Avoid covering foods until they are thoroughly cooled. Try to use the top shelf in the walk-in refrigerators for cooling. Cooked TCS Foods shall be cooled: 1) Within two (2) hours from 135°F to 70°F; and 2) within total of six (6) hours from 135°F to 41°F or less. If items are prepared from ambient temperatures such as tuna fish, cool to 41°F within four (4) hours or less.

Large food items, such as roast, turkeys, and large containers of rice or refried beans, take longer to cool because of the mass and volume form which heat must be removed. By reducing the volume of the food in an individual container, the rate of cooling is dramatically increased and opportunity for pathogen growth is minimized. If the hot food container is tightly covered, the rate of heat transfer is reduced. Commercial refrigeration equipment is designed to hold cold food temperatures, not cool large masses of food. Rapid chilling equipment is designed to cool the food to acceptable temperatures quickly by using very low temperatures and high rates of air circulation.]

33B. Frozen food

☒ ☐ ☐ ☐

34. Plant food properly cooked for hot holding

☒ ☐ ☐ ☐ ☐ ☐

35. Approved thawing methods used

☒ ☐ ☐ ☐ ☐ ☐

36A. Thermometers provided and accurate

☒ ☐ ☐ ☐

36B. Thermometers function properly

☒ ☐ ☐ ☐

## Food Identification

IN OUT COS REPEAT

37A. Food properly labeled; original container

☐ ☒ ☐ ☒

### Fail Notes

3-302.12

#### Food Storage Containers Identified with Common Name of Food

[None of the salad dressings in the cold holding salad area were labeled. Working containers of food / ingredients that are removed from their original packages for use, such as oils, salt etc. shall be identified with the common name of the food. Label all containers, bins and squeeze bottles.]

*Donal Kneel*

Inspector

Acknowledged Receipt :

Page 5 of 8

# Food Establishment Inspection Report - FDA

## Food Identification

IN OUT COS REPEAT

Fail Notes 3-602.11 (A, B 1-4, 6, 7)

**Packaged foods- properly labeled**  
*[The yogurt and pudding containers did not have labels with ingredients. None of the salad dressings had ingredient labels. Only one sandwich had an ingredient label. All of the sandwiches need a label of their ingredients on each package. Food packaged in a food establishment shall be labeled to include the following information: The common name of the food, if made from more than two ingredients, a list of ingredients and sub-ingredients in descending order of predominance by weight, including a declaration of artificial colors, artificial flavors and chemical preservatives, the net quantity of contents, the name and place of business of the manufacturer, packer, or distributor, and the major food allergen.]*

37B. Food labels, labeling of ingredients

☒ ☐ ☐ ☐

## Prevention of Food Contamination

IN OUT COS REPEAT

38A. Insects, rodents, & animals not present

☒ ☐ ☐ ☐

38B. Handling prohibition, controlling pests, prohibiting animals

☒ ☐ ☐ ☐

39A. Contamination prevented during food storage

☒ ☐ ☐ ☐

39B. Food display; ice used as an exterior coolant prohibited as an ingredient

☒ ☐ ☐ ☐

39C. Consumer self-service operations- utensils and monitoring

☒ ☐ ☐ ☐

40A. Personal cleanliness- prohibition jewelry

☒ ☐ ☐ ☐

40B. Maintenance of fingernails

☒ ☐ ☐ ☐

41. Wiping cloths; properly used and stored

☐ ☒ ☐ ☐

Fail Notes 3-304.14

### Wiping Cloths, Use Limitation

*[A wiping cloth was observed on a prep table. Wiping cloths in-use for wiping counters and other equipment surfaces shall be held between uses in a chemical sanitizer solution at a concentration specified by the manufacturer (read the label). Wiping cloths used for surfaces in contact with raw animal foods shall be kept separate from cloths used for other purposes. Containers of chemical sanitizing solution in which wet wiping cloths are held between uses shall be stored off the floor and used in a manner that prevents contamination of food, equipment, utensils, linens, and single-service items (to-go containers). If a surface needs to be wipe from crumbs or ingredients (not allergens or raw meats - to remove allergens, soapy water MUST be used) use a disposable paper towel. Use once and dispose. Avoid using wiping cloths under cutting boards and to cover foods. Instead use a non-slip mat under the cutting boards. Using a paper towel is acceptable to use to cover food however plastic wrap is recommended.]*

*Soiled wiping cloths, especially when moist, can become breeding grounds for pathogens that could be transferred to food. Wiping cloths soiled with organic material can overcome the effectiveness of, and neutralize, the sanitizer. The sanitizing solution must be changed as needed to minimize the accumulation of organic material and sustain proper concentration. Proper sanitizer concentration should be ensured by checking the solution periodically with an appropriate chemical test kit.]*

*Donal Huel*

Inspector

Acknowledged Receipt :

Page 6 of 8

## Food Establishment Inspection Report - FDA

Prevention of Food Contamination			IN	OUT	COS	REPEAT
	42A. Washing Produce - following chemical manufacturers label		<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
	42B. Washing produce		<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
	42C. Washing produce- chemicals		<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
Proper Use of Utensils			IN	OUT	COS	REPEAT
	43. In-use utensils; properly stored		<input type="radio"/>	<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
<i>Fail Notes</i>	3-304.12 <i>In-Use Utensils, Between-Use Storage</i> <i>[Some handles of scoops were observed in the food product by the self serve area. Ensure that an employee monitors this area. Handles of the scoops should be positioned out of the food product. ]</i>					
	44. Utensils, equipment & linens; properly stored, dried, and handled		<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
	45A. Single-use/ single service articles properly stored and used, required		<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
	45B. Single-use/service articles use limitation, kitchenware and tableware preventing contamination		<input type="radio"/>	<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
<i>Fail Notes</i>	4-903.11 (A&C) <i>Equipment, Utensils, Linens and Single-Service and Single-Use Articles-Storing</i> <i>[Not all single-use items (to go / disposable) were observed stored upside down. Single-service and single-use items shall be stored in a clean, dry location; where they are not exposed to splash, dust, or other contamination; and at least 6 inches above the floor and kept in the original protective package or stored by using other means that afford protection from contamination. Since single-use items are not designed to be cleaned and re-used; therefore, they must be properly stored and protected to prevent from possible contamination.]</i>					
	46. Gloves used properly		<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
Utensils, Equipment and Vending			IN	OUT	COS	REPEAT
	47A. Food & non-food contact surfaces cleanable		<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
	47B. Food contact surfaces /utensils cleanability, molluscan shellfish tanks, consumer self-service		<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
	47C. Properly designed characteristics: food and non-food contact surfaces, molluscan shellfish tanks		<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
	48A. Warewashing facilities: installed, maintained, & used; test strips		<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
	48B. Operational warewashing machines		<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
	49. Non-food contact surfaces clean		<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
Physical Facilities			IN	OUT	N/A	COS REPEAT
	50. Hot & cold water available; adequate pressure		<input checked="" type="radio"/>	<input type="radio"/>		<input type="checkbox"/>
	51A. Plumbing installed; proper backflow devices		<input checked="" type="radio"/>	<input type="radio"/>		<input type="checkbox"/>
	51B. Prohibiting a cross-connection, inspection and servicing system		<input checked="" type="radio"/>	<input type="radio"/>		<input type="checkbox"/>
	51C. Approved system and cleanable fixtures, service sink		<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>
	52A. Sewage and waste water properly disposed		<input type="radio"/>	<input checked="" type="radio"/>		<input type="checkbox"/>

*Don't Know*

Inspector

Acknowledged Receipt :

Page 7 of 8

## Food Establishment Inspection Report - FDA

### Physical Facilities

IN OUT N/A COS REPEAT

*Fail Notes*    5-402.11    *\*Backflow Prevention*  
*[It does not appear that the food prep sink has an indirect waste connection. A direct connection may not exist between the sewage system and a drain originating from equipment in which food, portable equipment, or utensils are placed.]*

- |   |   |   |   |   |
|---|---|---|---|---|
| 52B. Grease traps easily accessible for cleaning                  | ⊙ | ○ | □ | □ |
| 52C. Removing mobile food establishment waste                     | ○ | ○ | ⊙ | □ |
| 53A. Toilet facilities; properly constructed, supplied, & cleaned | ○ | ⊙ | □ | □ |
- Fail Notes*    5-501.17    *Toilet room receptacle, covered- sanitary napkins*  
*[A covered receptacle was not observed in the women's restroom. A toilet room used by females shall be provided with a covered receptacle for sanitary napkins. Provide a covered container.]*
- |   |   |   |   |   |
|---|---|---|---|---|
| 53B. Toilet tissue availability                                     | ⊙ | ○ | □ | □ |
| 54. Garbage & refuse properly disposed; facilities maintained       | ⊙ | ○ | □ | □ |
| 55A. Physical facilities installed, maintained, & clean             | ⊙ | ○ | □ | □ |
| 55B. Private homes and living or sleeping quarters, use prohibition | ⊙ | ○ | □ | □ |
| 56. Adequate ventilation & lighting; designated areas used          | ⊙ | ○ | □ | □ |

### MASSACHUSETTS ONLY REGULATIONS

Rules and Regulations adopted for use in Massachusetts only.

### Facilities

IN OUT COS REPEAT

- |   |   |   |   |   |
|---|---|---|---|---|
| 57A. Catering   | ○ | ○ | □ | □ |
| 57B. When plans are reviewed, prerequisite for operations- valid permit | ○ | ○ | □ | □ |
| 57C. Contents of plans and specifications, preoperational inspections   | ○ | ○ | □ | □ |
| 58. Mobile Food Operations  | ○ | ○ | □ | □ |
| 59. Temporary Food Establishments                                       | ○ | ○ | □ | □ |
| 60. Residential Kitchens  | ○ | ○ | □ | □ |

### Procedures

IN OUT COS REPEAT

- |   |   |   |   |   |
|---|---|---|---|---|
| 61. Anti-choking Procedures             | ○ | ○ | □ | □ |
| 62. Tobacco Products: Notice and Sale   | ○ | ○ | □ | □ |
| 63. Food Allergy Awareness Requirements | ⊙ | ○ | □ | □ |



Inspector

Acknowledged Receipt :

Page 8 of 8



City of Newton  
Health and Human Services  
Deborah Youngblood, PhD, Commissioner  
1000 Commonwealth Ave Newton, MA 02459  
(617) 796-1420



**Public Health**  
Prevent, Promote, Protect

Food Establishment Inspection Report - FDA

**Insp Date:** 10/16/2018 **Business ID:** 1N2149  
**Business:** FA Day Middle School  
21 Minot Pl.

Newton, MA 02460

**Inspection:** 6N000053  
**Section:** 4  
**Phone:** 559-9100  
**Inspector:** 1N11123 Nicola Assan  
**Reason:** 1-Routine  
**Results:** No Follow-up

Inspection Summary

Official Order for Correction: Based on an inspection today, the items checked indicate violations of 105 CMR 590.000/ 2009 Federal Food Code. This report, when signed below by the Commissioner of Health / Agent constitutes an order by the Commissioner of Health. Failure to correct violations cited in this report may result in suspension or revocation of the food establishment permit and cessation of food establishment operations. If aggrieved by this order, you have the right to a hearing. The request must be in writing and submitted to the Commissioner of Health at the above address within 10 days of receipt of this order.

Est. Type 1 - Food Svc Establish License/Permit # \_\_\_\_\_ Risk Category 02 Risk Level Observed 02 Low

FOODBORNE ILLNESS RISK FACTORS AND PUBLIC HEALTH INTERVENTIONS

Compliance status: IN = in compliance OUT = not in compliance N/O = not observed N/A = not applicable

Marked in appropriate box for COS and/or R. COS = corrected on-site during inspection R = repeat violation

Risk factors are improper practices or procedures identified as the most prevalent contributing factors of foodborne illness or injury. Public Health interventions are control measures to prevent foodborne illnesses or injury.

Supervision

1A. PIC Present

B. Cert. food manager, knowledge, no critical violations

C. Duties of PIC

IN OUT N/O N/A COS REPEAT

☒ ☐ ☐ ☐ ☐ ☐

☒ ☐ ☐ ☐ ☐ ☐

☒ ☐ ☐ ☐ ☐ ☐

Employee Health

2. Management, food employee and conditional employee; knowledge, responsibilities and reporting

3. Proper use of restriction and exclusion

IN OUT N/O N/A COS REPEAT

☒ ☐ ☐ ☐ ☐ ☐

☒ ☐ ☐ ☐ ☐ ☐

Good Hygienic Practices

4A. Proper eating, tasting, drinking, or tobacco use

B. Preventing contamination when tasting

5. No discharge from eyes, nose, and mouth

IN OUT N/O N/A COS REPEAT

☒ ☐ ☐ ☐ ☐ ☐

☒ ☐ ☐ ☐ ☐ ☐

☒ ☐ ☐ ☐ ☐ ☐

*Assan*

Inspector

Acknowledged Receipt : Tim Viveiros

Page 1 of 6

## Food Establishment Inspection Report - FDA

### Preventing Contamination by Hands

6A. Hands clean & properly washed

IN	OUT	N/O	N/A	COS	REPEAT
<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>

B. Where to wash, hand antiseptics

<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>
----------------------------------	-----------------------	-----------------------	--	--------------------------	--------------------------

7. No bare hand contact with RTE food or a pre-approved alternative procedure properly allowed

<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
----------------------------------	-----------------------	-----------------------	-----------------------	--------------------------	--------------------------

8A. Adequate handwashing sinks properly supplied and accessible

<input type="radio"/>	<input checked="" type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>
-----------------------	----------------------------------	--	--	--------------------------	--------------------------

*Fail Notes* | 6-301.12 *Hand Drying Provision*  
[There were no paper towels in the dispenser to the handsink. You must refill the paper towel dispenser.]

B. Handwashing sinks accessible with proper signage, handwashing aids

<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>
----------------------------------	-----------------------	--	--	--------------------------	--------------------------

C. Conveniently located handwashing sink

<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>
----------------------------------	-----------------------	--	--	--------------------------	--------------------------

### Approved Sources

9A. Milk, eggs, juice, bottled water, hermetically sealed food

<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>
----------------------------------	-----------------------	--	--	--------------------------	--------------------------

B. Fish and shellfish

<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
----------------------------------	-----------------------	-----------------------	-----------------------	--------------------------	--------------------------

10. Food received at proper temperature

<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
-----------------------	-----------------------	----------------------------------	-----------------------	--------------------------	--------------------------

11. Food in good condition, safe, & unadulterated

<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>
----------------------------------	-----------------------	--	--	--------------------------	--------------------------

### Protection from Contamination

12A. Food separated & protected

<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
----------------------------------	-----------------------	-----------------------	-----------------------	--------------------------	--------------------------

B. Gloves, use limitation, one task- contaminated

<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
----------------------------------	-----------------------	-----------------------	-----------------------	--------------------------	--------------------------

13A. Food-contact surfaces: cleaned & sanitized 171° F

<input type="radio"/>	<input checked="" type="radio"/>		<input type="radio"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
-----------------------	----------------------------------	--	-----------------------	-------------------------------------	--------------------------

**This item has Notes. See Footnote 1 at end of questionnaire.**

*Fail Notes* | 4-501.114 *Chemical Sanitization - Temperature, pH, Concentration and Hardness*  
[It appeared that there was no sanitizer in the red buckets and the 3 bay compartment sink (measured 0 ppm when tested with test strips). You must ensure that the concentration of the sanitizing solutions are in accordance with the manufacturer's label.]

B. Food contact surfaces cleaned and sanitized NMT 194° F, NLT 180° F

<input type="radio"/>	<input type="radio"/>		<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
-----------------------	-----------------------	--	-----------------------	--------------------------	--------------------------

C. Mechanical warewashing equipment sanitization food contact surfaces, equip., utensils

<input type="radio"/>	<input type="radio"/>		<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
-----------------------	-----------------------	--	-----------------------	--------------------------	--------------------------

14. Proper disposition of returned, previously served reconditions, & unsafe food

<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>
----------------------------------	-----------------------	--	--	--------------------------	--------------------------

### Potentially Hazardous Food Time/Temperature

15. Proper cooking time & temperatures

<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
-----------------------	-----------------------	----------------------------------	-----------------------	--------------------------	--------------------------

16. Proper reheating procedures for hot holding

<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
-----------------------	-----------------------	----------------------------------	-----------------------	--------------------------	--------------------------

17. Proper cooling time & temperatures

<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
-----------------------	-----------------------	----------------------------------	-----------------------	--------------------------	--------------------------

**This item has Notes. See Footnote 2 at end of questionnaire.**

18. Proper hot holding temperatures

<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
-----------------------	----------------------------------	-----------------------	-----------------------	--------------------------	--------------------------

*Assan*

Inspector

Acknowledged Receipt : Tim Viveiros

Page 2 of 6

## Food Establishment Inspection Report - FDA

Potentially Hazardous Food Time/Temperature

IN OUT N/O N/A COS REPEAT

Fail Notes 3-501.16 (A) \*Hot PHFs Maintained at or Above 135oF  
[The temperature of the cheeseburgers, hamburgers and hotdogs in the hot holding units ranged from 99.9 - 111.0 degrees fahrenheit. Maintaining food at a temperature of 135 degrees fahrenheit or greater during hot holding is sufficient to prevent the growth of pathogens and is therefore an effective measure in the prevention of foodborne illness. It is essential that you ensure food in the hot holding units are maintained at a temperature of 135 degrees fahrenheit or greater. ]

19. Proper cold holding temperatures

☐ ☒ ☐ ☐ ☐ ☐

Fail Notes 3-501.16(B) [590.004(F)] \*Cold PHFs Maintained at or Below 41oF  
[The temperature of the sandwiches, salads and wraps in the salad bar cold holding unit ranged from 45.9 - 48.0 degrees fahrenheit. These food items contain TCS (time/temperature control for safety food) such as sliced tomatoes, cold meats and lettuce. Maintain the internal temperature of TCS foods at 41 degrees fahrenheit or below.]

20. Time as a public health control: procedures & record

☒ ☐ ☐ ☐ ☐ ☐

Highly Susceptible Populations

IN OUT N/O N/A COS REPEAT

21. Pasteurized foods used; prohibited foods not offered

☐ ☐ ☒ ☐ ☐

Chemical

IN OUT N/O N/A COS REPEAT

22. Food additives: approved and properly used

☐ ☐ ☒ ☐ ☐

23A. Toxic substances properly identified, stored and used

☒ ☐ ☐ ☐ ☐

B. Restriction presence and use, restriction and storage of medicines

☒ ☐ ☐ ☐ ☐

C. Storage- other personal care items

☒ ☐ ☐ ☐ ☐

### GOOD RETAIL PRACTICES

Good Retail Practices are preventative measures to control the addition of pathogens, chemicals, and physical objects into foods.

IN = In compliance OUT = not in compliance COS - corrected on -site during inspection REPEAT = repeat violation

Safe Food and Water

IN OU N/ N/A CO REPEA

24. Water & ice from approved source

☒ ☐ ☐ ☐ ☐ ☐

Food Temperature Control

IN OUT N/O N/A COS REPEAT

25A. Proper cooling methods used; adequate equipment for temperature control

☐ ☐ ☒ ☐ ☐ ☐

**This item has Notes. See Footnote 3 at end of questionnaire.**

B. Frozen food

☒ ☐ ☐ ☐ ☐ ☐

26. Plant food properly cooked for hot holding

☒ ☐ ☐ ☐ ☐ ☐

27. Approved thawing methods used

☒ ☐ ☐ ☐ ☐ ☐

28A. Thermometers provided and accurate

☒ ☐ ☐ ☐ ☐ ☐

*Assan*

Inspector

Acknowledged Receipt : Tim Viveiros

Page 3 of 6

## Food Establishment Inspection Report - FDA

### Food Temperature Control

B. Thermometers function properly

IN	OUT	N/O	N/A	COS	REPEAT
<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

### Food Identification

29A. Food properly labeled; original container

IN	OUT	COS	REPEAT
<input type="radio"/>	<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

Fail Notes	3-302.12	<p><i>Food Storage Containers Identified with Common Name of Food</i>  <i>[Some of the salad dressings in the salad bar cold holding unit were not labeled. Certain foods may be difficult to identify after they have been removed from their original packaging. Consumers may be allergic to certain foods or ingredients and may result in severe medical consequences if consumed. It is therefore necessary that you label all such containers.]</i></p>
------------	----------	--

B. Food labels, labeling of ingredients

<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
----------------------------------	-----------------------	--------------------------	--------------------------

### Prevention of Food Contamination

30A. Insects, rodents, & animals not present

<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
----------------------------------	-----------------------	--------------------------	--------------------------

B. Handling prohibition, controlling pests, prohibiting animals

<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
----------------------------------	-----------------------	--------------------------	--------------------------

31A. Contamination prevented during food storage

<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
----------------------------------	-----------------------	--------------------------	--------------------------

B. Food display; ice used as an exterior coolant prohibited as an ingredient

<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
-----------------------	-----------------------	--------------------------	--------------------------

C. Consumer self-service operations- utensils and monitoring

<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
----------------------------------	-----------------------	--------------------------	--------------------------

32A. Personal cleanliness- prohibition jewelry

<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
----------------------------------	-----------------------	--------------------------	--------------------------

B. Maintenance of fingernails

<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
----------------------------------	-----------------------	--------------------------	--------------------------

33. Wiping cloths; properly used and stored

<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
----------------------------------	-----------------------	--------------------------	--------------------------

34. Washing fruits & vegetables

<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
----------------------------------	-----------------------	--------------------------	--------------------------

### Proper Use of Utensils

35. In-use utensils; properly stored

<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
----------------------------------	-----------------------	--------------------------	--------------------------

36. Utensils, equipment & linens; properly stored, dried, and handled

<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
----------------------------------	-----------------------	--------------------------	--------------------------

37A. Single-use/ single service articles properly stored and used, required

<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
----------------------------------	-----------------------	--------------------------	--------------------------

B. Single-use/service articles use limitation, kitchenware and tableware preventing contamination

<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
----------------------------------	-----------------------	--------------------------	--------------------------

38. Gloves used properly

<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
----------------------------------	-----------------------	--------------------------	--------------------------

### Utensils, Equipment and Vending

39A. Food & non-food contact surfaces cleanable

<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
----------------------------------	-----------------------	--------------------------	--------------------------

B. Food contact surfaces /utensils cleanability, molluscan shellfish tanks, consumer self-service

<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
----------------------------------	-----------------------	--------------------------	--------------------------

C. Properly designed characteristics: food and non-food contact surfaces, molluscan shellfish tanks

<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
----------------------------------	-----------------------	--------------------------	--------------------------

40A. Warewashing facilities: installed, maintained, & used; test strips

<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
-----------------------	-----------------------	--------------------------	--------------------------

B. Operational warewashing machines

<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
-----------------------	-----------------------	--------------------------	--------------------------

41. Non-food contact surfaces clean

<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
----------------------------------	-----------------------	--------------------------	--------------------------

### Physical Facilities

IN	OUT	N/O	N/A	COS	REPEAT
----	-----	-----	-----	-----	--------

*Assan*

Inspector

Acknowledged Receipt : Tim Viveiros

Page 4 of 6

## Food Establishment Inspection Report - FDA

### Physical Facilities

	IN	OUT	N/O	N/A	COS	REPEAT
42. Hot & cold water available; adequate pressure	<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>
43A. Plumbing installed; proper backflow devices	<input type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>
B. Prohibiting a cross-connection, non-drinking water, system maintained in good repair	<input type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>
C. Approved system and cleanable fixtures, service sink	<input type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>
44A. Sewage and waste water properly disposed	<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>
B. Grease traps easily accessible for cleaning	<input type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>
45A. Toilet facilities; properly constructed, supplied, & cleaned	<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>
B. Toilet tissue availability	<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>
46. Garbage & refuse properly disposed; facilities maintained	<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>
47A. Physical facilities installed, maintained, & clean	<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>
B. Cleaning maintenance tools, preventing contamination	<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>
48. Adequate ventilation & lighting; designated areas used	<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>

### MASSACHUSETTS ONLY REGULATIONS

Rules and Regulations adopted for use in Massachusetts only.

#### Facilities

	IN	OU	CO	REPEA
49A. When plans are reviewed, prerequisite for operations- valid permit	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
B. Contents of plans and specifications, preoperational inspections	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

#### Procedures

	IN	OUT	COS	REPEAT
50. Anti-choking Procedures	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
51. Tobacco Products: Notice and Sale	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

*Assan*

Inspector

Acknowledged Receipt : Tim Viveiros

Page 5 of 6

## Food Establishment Inspection Report - FDA

### Footnote 1

**Notes:**

The PIC immediately corrected this problem, informing the staff to ensure the correct concentration is used by regularly verifying the concentration using the test strips provided.

### Footnote 2

**Notes:**

Although cooling time and temperatures were not observed at the time of visit, the PIC informed me that, for example, she cooked chicken that morning (around 8am) for use in salad and wraps but 2 hours later one of the food employees needed to prepare the salads and wraps but the chicken hadn't cooled down enough (hence the high temps(48.0 degrees F) of the chilled cabinet displaying the salad and the wraps). In future she (PIC) will cook the chicken earlier.  
See violation #19 3-501.16(B)

### Footnote 3

**Notes:**

Although cooling procedures were not observed at the time of inspection, after speaking with the PIC there does not appear to be efficient cooling methods in place.

Safe cooling requires removing heat from food quickly enough to prevent microbial growth. excessive time for cooling time/temperature control for safety foods is one of the contributing factors to foodborne illness.

The proper time frame for cooling cooked food is: Cool from 135 degrees F to 41 degrees F within 6 hours.

Proper cooling methods include: place food in shallow pans; separate food into smaller or thinner portions; stir the food in a container placed in an ice water bath; use rapid cooling equipment such as ice wands and blast chillers; use containers that facilitate the heat transfer; arrange the food in the equipment to provide maximum heat transfer through the container walls; avoid covering foods until they are thoroughly cooled, try to use the top shelf in the walk-in refrigerators for cooling.



Inspector

Acknowledged Receipt : Tim Viveiros

Page 6 of 6



City of Newton  
Health and Human Services  
Deborah Youngblood, PhD, Commissioner  
1000 Commonwealth Ave Newton, MA 02459  
(617) 796-1420



Public Health  
Prevent. Promote. Protect.

Food Establishment Inspection Report - FDA

Insp Date: 4/9/2019 Business ID: 1N2149

Business: FA Day Middle School  
21 Minot Pl.

Newton, MA 02460

Inspection: 6N000102

Section: 4

Phone: 559-9100

Inspector: 1N11123 Nicola Assan

Reason: 1-Routine

Results: No Follow-up R2

Inspection Summary

Official Order for Correction: Based on an inspection today, the items checked indicate violations of 105 CMR 590.000/ 2013 Federal Food Code. This report, when signed below by the Commissioner of Health / Agent constitutes an order by the Commissioner of Health. Failure to correct violations cited in this report may result in suspension or revocation of the food establishment permit and cessation of food establishment operations. If aggrieved by this order, you have the right to a hearing. The request must be in writing and submitted to the Commissioner of Health at the above address within 10 days of receipt of this order.

Est. Type 1 - Food Svc Establish License/Permit # \_\_\_\_\_ Risk Category 02 Risk Level Observed 02 Low

Foodborne Illness Complaint Investigated (All) ☐ Involving More Than Two Persons ☐

FOODBORNE ILLNESS RISK FACTORS AND PUBLIC HEALTH INTERVENTIONS

Compliance status: IN = in compliance OUT = not in compliance N/O = not observed N/A = not applicable

Marked in appropriate box for COS and/or R. COS = corrected on-site during inspection R = repeat violation

Risk factors are improper practices or procedures identified as the most prevalent contributing factors of foodborne illness or injury. Public Health Interventions are control measures to prevent foodborne illnesses or injury.

Supervision

1. PIC Present, Knowledge and Duties

IN OUT N/O N/A COS REPEAT

⊙ ○ □ □

2. Certified Food Protection Manager

⊙ ○ ○ □ □

Employee Health / Responding to Contamination Events

3A. Employee Health: PIC Knowledge, Responsibilities & Reporting

IN OUT N/O N/A COS REPEAT

⊙ ○ □ □

3B. Employee Reporting to PIC

⊙ ○ □ □

4. Proper Use of Restriction & Exclusion

⊙ ○ □ □

5. Clean-up of Vomiting and Diarrheal Events

⊙ ○ □ □

Good Hygienic Practices

6A. Proper eating, tasting, drinking, or tobacco use

IN OUT N/O N/A COS REPEAT

⊙ ○ ○ □ □

6B. Preventing contamination when tasting

⊙ ○ ○ □ □

Inspector

Acknowledged Receipt : Tim Viveiros

Page 1 of 5

## Food Establishment Inspection Report - FDA

### Good Hygienic Practices

7. No discharge from eyes, nose, and mouth

IN	OUT	N/O	N/A	COS	REPEAT
<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>

### Control of Hands as a Vehicle of Contamination

8A. Hands clean & properly washed

<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>
----------------------------------	-----------------------	-----------------------	--	--------------------------	--------------------------

8B. Where to wash, hand antiseptics

<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>
----------------------------------	-----------------------	-----------------------	--	--------------------------	--------------------------

9. No bare hand contact with RTE food or a pre-approved alternative procedure properly allowed

<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
----------------------------------	-----------------------	-----------------------	-----------------------	--------------------------	--------------------------

10A. Adequate handwashing sinks properly supplied and accessible

<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>
----------------------------------	-----------------------	--	--	--------------------------	--------------------------

10B. Handwashing sinks accessible with proper signage, handwashing aids

<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>
----------------------------------	-----------------------	--	--	--------------------------	--------------------------

### Approved Sources

11A. Milk, eggs, juice, bottled water, hermetically sealed food, game animals

<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
----------------------------------	-----------------------	-----------------------	-----------------------	--------------------------	--------------------------

11B. Packaged foods, labeling, whole muscle beef

<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
----------------------------------	-----------------------	-----------------------	-----------------------	--------------------------	--------------------------

11C. Obtaining raw fish, packaged meat & poultry, eggs

<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
----------------------------------	-----------------------	-----------------------	-----------------------	--------------------------	--------------------------

12A. Food received at proper temperature

<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
-----------------------	-----------------------	----------------------------------	-----------------------	--------------------------	--------------------------

12B. Shipping and receiving frozen food

<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
-----------------------	-----------------------	----------------------------------	-----------------------	--------------------------	--------------------------

13. Food in good condition, honestly presented, safe, & unadulterated

<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>
----------------------------------	-----------------------	--	--	--------------------------	--------------------------

13B. Food package integrity

<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>
----------------------------------	-----------------------	--	--	--------------------------	--------------------------

14A. Required records available: shellstock tags, parasite destruction

<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
-----------------------	-----------------------	-----------------------	----------------------------------	--------------------------	--------------------------

14B. Missing shellstock tags, destruction

<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
-----------------------	-----------------------	-----------------------	----------------------------------	--------------------------	--------------------------

14C. Parasite destruction- storing raw/partially cooked fish

<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
-----------------------	-----------------------	-----------------------	----------------------------------	--------------------------	--------------------------

### Protection from Contamination

15A. Food separated & protected

<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
----------------------------------	-----------------------	-----------------------	-----------------------	--------------------------	--------------------------

15B. Cleaning equip/utensils/food containers

<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
----------------------------------	-----------------------	-----------------------	-----------------------	--------------------------	--------------------------

16A. Food-contact surfaces: cleaned & sanitized immersion 171° F and above

<input checked="" type="radio"/>	<input type="radio"/>		<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
----------------------------------	-----------------------	--	-----------------------	--------------------------	--------------------------

16B. Food contact surfaces cleaned and sanitized NMT 194° F, NLT 180° F

<input checked="" type="radio"/>	<input type="radio"/>		<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
----------------------------------	-----------------------	--	-----------------------	--------------------------	--------------------------

16C. Mechanical warewashing equipment sanitization food contact surfaces, equip., utensils

<input checked="" type="radio"/>	<input type="radio"/>		<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
----------------------------------	-----------------------	--	-----------------------	--------------------------	--------------------------

17. Proper disposition of returned, previously served reconditions, & unsafe food

<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>
----------------------------------	-----------------------	--	--	--------------------------	--------------------------

### Time/Temperature Control for Safety Food (TCS Food)

18A. Proper cooking time & temperatures

<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
-----------------------	-----------------------	----------------------------------	-----------------------	--------------------------	--------------------------

18B. Whole meat cooking and serving, storing

<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
-----------------------	-----------------------	-----------------------	----------------------------------	--------------------------	--------------------------

18C. Microwave cooking of raw animal foods

<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
-----------------------	-----------------------	-----------------------	----------------------------------	--------------------------	--------------------------

19. Proper reheating procedures for hot holding

<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
-----------------------	-----------------------	----------------------------------	-----------------------	--------------------------	--------------------------

20. Proper cooling time & temperatures

<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
-----------------------	-----------------------	----------------------------------	-----------------------	--------------------------	--------------------------

21. Proper hot holding temperatures

<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
----------------------------------	-----------------------	-----------------------	-----------------------	--------------------------	--------------------------

*Arson*

Inspector

Acknowledged Receipt : Tim Viveiros

Page 2 of 5

## Food Establishment Inspection Report - FDA

Time/Temperature Control for Safety Food (TCS Food)	IN	OUT	N/O	N/A	COS	REPEAT
---	----	-----	-----	-----	-----	--------

22. Proper cold holding temperatures

☐ ☒ ☐ ☐ ☐ ☐

Fail Notes	3-501.16(A2 &B)	<i>*Cold PHFs Maintained at or Below 41oF- also pertains to untreated eggs (45F) [The following TCS (time/temperature control for safety) foods in the sandwich and salad bars had internal temperatures ranging from 42.1 to 51.8 degrees F. Maintain the internal temperature of TCS foods at 41 degrees F or below.]</i>
------------	-----------------	---

23. Proper Date Marking

☒ ☐ ☐ ☐ ☐ ☐

23B. TCS Foods Disposition

☒ ☐ ☐ ☐ ☐ ☐

24A. Time as a public health control: procedures

☐ ☐ ☐ ☒ ☐ ☐

24B. Time as a public health control: temperatures & discarding food

☐ ☐ ☐ ☒ ☐ ☐

24C. Time as a public health control: highly susceptible population (HSP)

☐ ☐ ☐ ☒ ☐ ☐

Consumer Advisory
-------------------

IN	OUT	N/O	N/A	COS	REPEAT
----	-----	-----	-----	-----	--------

25. Consumer advisory provided for raw or undercooked foods

☐ ☐ ☐ ☒ ☐ ☐

Highly Susceptible Populations (HSP)
--------------------------------------

IN	OUT	N/O	N/A	COS	REPEAT
----	-----	-----	-----	-----	--------

26A. Pasteurized foods used; prohibited foods not offered

☐ ☐ ☐ ☒ ☐ ☐

26B. Reservice of foods

☐ ☐ ☐ ☒ ☐ ☐

Chemical
----------

IN	OUT	N/O	N/A	COS	REPEAT
----	-----	-----	-----	-----	--------

27. Food additives: approved and properly used

☐ ☐ ☐ ☒ ☐ ☐

28A. Toxic substances identified, stored and used

☒ ☐ ☐ ☐ ☐ ☐

28B. Poisonous materials, sanitizers, additives, medicines restriction, separation, storage

☒ ☐ ☐ ☐ ☐ ☐

28C. Conditions of Use: law

☒ ☐ ☐ ☐ ☐ ☐

Conformance with Approved Procedures
--------------------------------------

IN	OUT	N/O	N/A	COS	REPEAT
----	-----	-----	-----	-----	--------

29A. Compliance with variance, specialized process, & HACCP plan

☐ ☐ ☐ ☒ ☐ ☐

29B. Treating juice- HACCP, reduced oxygen packaging w/out variance, conformance with approved procedures

☐ ☐ ☐ ☒ ☐ ☐

29C. When HACCP plan is required

☐ ☐ ☐ ☒ ☐ ☐

### GOOD RETAIL PRACTICES

Good Retail Practices are preventative measures to control the addition of pathogens, chemicals, and physical objects into foods.

IN = In compliance    OUT = not in compliance    COS - corrected on -site during inspection    REPEAT = repeat violation

Safe Food and Water
---------------------

IN	OUT	N/O	N/A	COS	REPEAT
----	-----	-----	-----	-----	--------

30. Pasteurized eggs used where required

☐ ☐ ☐ ☐ ☐ ☐

31A. Water & ice from approved source

☒ ☐ ☐ ☐ ☐ ☐

31B. Sampling, alternative water supply

☐ ☐ ☐ ☒ ☐ ☐

Inspector

Acknowledged Receipt : Tim Viveiros

Page 3 of 5

## Food Establishment Inspection Report - FDA

Safe Food and Water	IN	OUT	N/O	N/A	COS	REPEAT
31C. Sampling report	<input type="radio"/>	<input type="radio"/>		<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
32. Variance obtained for specialized processing methods	<input type="radio"/>	<input type="radio"/>		<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
Food Temperature Control	IN	OUT	N/O	N/A	COS	REPEAT
33A. Proper cooling methods used; adequate equipment for temperature control	<input type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>
33B. Frozen food	<input type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>
34. Plant food properly cooked for hot holding	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
35. Approved thawing methods used	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
36A. Thermometers provided and accurate	<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>
36B. Thermometers function properly	<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>
Food Identification	IN	OUT			COS	REPEAT
37A. Food properly labeled; original container		<input checked="" type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>
37B. Food labels, labeling of ingredients		<input checked="" type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>
Prevention of Food Contamination	IN	OUT			COS	REPEAT
38A. Insects, rodents, & animals not present		<input checked="" type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>
38B. Handling prohibition, controlling pests, prohibiting animals		<input checked="" type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>
39A. Contamination prevented during food storage		<input checked="" type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>
39B. Food display; ice used as an exterior coolant prohibited as an ingredient		<input checked="" type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>
39C. Consumer self-service operations- utensils and monitoring		<input checked="" type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>
40A. Personal cleanliness- prohibition jewelry		<input checked="" type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>
40B. Maintenance of fingernails		<input checked="" type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>
41. Wiping cloths; properly used and stored		<input checked="" type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>
42A. Washing Produce - following chemical manufacturers label		<input type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>
42B. Washing produce		<input checked="" type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>
42C. Washing produce- chemicals		<input type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>
Proper Use of Utensils	IN	OUT			COS	REPEAT
43. In-use utensils; properly stored		<input checked="" type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>
44. Utensils, equipment & linens; properly stored, dried, and handled		<input checked="" type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>
45A. Single-use/ single service articles properly stored and used, required		<input checked="" type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>
45B. Single-use/service articles use limitation, kitchenware and tableware preventing contamination		<input checked="" type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>
46. Gloves used properly		<input checked="" type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>
Utensils, Equipment and Vending	IN	OUT			COS	REPEAT
47A. Food & non-food contact surfaces cleanable		<input checked="" type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>

*M. Arson*

Inspector

Acknowledged Receipt : Tim Viveiros

Page 4 of 5

## Food Establishment Inspection Report - FDA

### Utensils, Equipment and Vending

	IN	OUT	COS	REPEAT
47B. Food contact surfaces /utensils cleanability, molluscan shellfish tanks, consumer self-service	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
47C. Properly designed characteristics: food and non-food contact surfaces, molluscan shellfish tanks	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
48A. Warewashing facilities: installed, maintained, & used; test strips	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
48B. Operational warewashing machines	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
49. Non-food contact surfaces clean	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

### Physical Facilities

	IN	OUT	N/A	COS	REPEAT
50. Hot & cold water available; adequate pressure	<input checked="" type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>
51A. Plumbing installed; proper backflow devices	<input checked="" type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>
51B. Prohibiting a cross-connection, inspection and servicing system	<input checked="" type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>
51C. Approved system and cleanable fixtures, service sink	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
52A. Sewage and waste water properly disposed	<input checked="" type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>
52B. Grease traps easily accessible for cleaning	<input checked="" type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>
52C. Removing mobile food establishment waste	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
53A. Toilet facilities; properly constructed, supplied, & cleaned	<input checked="" type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>
53B. Toilet tissue availability	<input checked="" type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>
54. Garbage & refuse properly disposed; facilities maintained	<input checked="" type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>
55A. Physical facilities installed, maintained, & clean	<input checked="" type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>
55B. Private homes and living or sleeping quarters, use prohibition	<input checked="" type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>
56. Adequate ventilation & lighting; designated areas used	<input checked="" type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>

### MASSACHUSETTS ONLY REGULATIONS

Rules and Regulations adopted for use in Massachusetts only.

#### Facilities

	IN	OUT	COS	REPEAT
57A. Catering	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
57B. When plans are reviewed, prerequisite for operations- valid permit	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
57C. Contents of plans and specifications, preoperational inspections	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
58. Mobile Food Operations	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
59. Temporary Food Establishments	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
60. Residential Kitchens	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

#### Procedures

	IN	OUT	COS	REPEAT
61. Anti-choking Procedures	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
62. Tobacco Products: Notice and Sale	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
63. Food Allergy Awareness Requirements	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

*Mass*

Inspector

Acknowledged Receipt : Tim Viveiros

Page 5 of 5



City of Newton  
Health and Human Services  
Deborah Youngblood, PhD, Commissioner  
1000 Commonwealth Ave Newton, MA 02459  
(617) 796-1420



Public Health  
Prevent. Promote. Protect.

Food Establishment Inspection Report - FDA

Insp Date: 10/26/2017 Business ID: 1N2162  
Business: Franklin School  
125 Derby St.

Newton, MA 02465

Inspection: CN000355  
Section: 4  
Phone: 617-559-9500  
Inspector: 1N11121 Derek Kwok  
Reason: 1-Routine  
Results: No Follow-up R2

Inspection Summary

Official Order for Correction: Based on an inspection today, the items checked indicate violations of 105 CMR 590.000/ 2013 Federal Food Code. This report, when signed below by the Commissioner of Health / Agent constitutes an order by the Commissioner of Health. Failure to correct violations cited in this report may result in suspension or revocation of the food establishment permit and cessation of food establishment operations. If aggrieved by this order, you have the right to a hearing. The request must be in writing and submitted to the Commissioner of Health at the above address within 10 days of receipt of this order.

Est. Type 1 - Food Svc Establis License/Permit # \_\_\_\_\_ Risk Category 02 Risk Level Observed 02 Low

Foodborne Illness Complaint Investigated (All) ☐ Involving More Than Two Persons ☐

FOODBORNE ILLNESS RISK FACTORS AND PUBLIC HEALTH INTERVENTIONS

Compliance status: IN = in compliance OUT = not in compliance N/O = not observed N/A = not applicable

Marked in appropriate box for COS and/or R. COS = corrected on-site during inspection R = repeat violation

Risk factors are improper practices or procedures identified as the most prevalent contributing factors of foodborne illness or injury. Public Health Interventions are control measures to prevent foodborne illnesses or injury.

Supervision

1. PIC Present, Knowledge and Duties

IN	OUT	N/O	N/A	COS	REPEAT
<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>

2. Certified Food Protection Manager

<input type="radio"/>	<input checked="" type="radio"/>		<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
-----------------------	----------------------------------	--	-----------------------	--------------------------	--------------------------

Fail Notes | 2-102.12 (A) *Certified food protection manager*  
*[The employee in charge did not have her food protection manager certificate.]*

Employee Health / Responding to Contamination Events

3A. Employee Health: PIC Knowledge, Responsibilities & Reporting

<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>
----------------------------------	-----------------------	--	--	--------------------------	--------------------------

3B. Employee Reporting to PIC

<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>
----------------------------------	-----------------------	--	--	--------------------------	--------------------------

4. Proper Use of Restriction & Exclusion

<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>
----------------------------------	-----------------------	--	--	--------------------------	--------------------------

5. Clean-up of Vomiting and Diarrheal Events

<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>
----------------------------------	-----------------------	--	--	--------------------------	--------------------------

Good Hygienic Practices

IN	OUT	N/O	N/A	COS	REPEAT
----	-----	-----	-----	-----	--------

*Derek Kwok*

Inspector

Acknowledged Receipt:

Page 1 of 5

## Food Establishment Inspection Report - FDA

### Good Hygienic Practices

6A. Proper eating, tasting, drinking, or tobacco use

IN OUT N/O N/A COS REPEAT  
☒ ☐ ☐ ☐ ☐

6B. Preventing contamination when tasting

☒ ☐ ☐ ☐ ☐

7. No discharge from eyes, nose, and mouth

☒ ☐ ☐ ☐ ☐

### Control of Hands as a Vehicle of Contamination

8A. Hands clean & properly washed

☒ ☐ ☐ ☐ ☐

8B. Where to wash, hand antiseptics

☒ ☐ ☐ ☐ ☐

9. No bare hand contact with RTE food or a pre-approved alternative procedure properly allowed

☒ ☐ ☐ ☐ ☐ ☐

10A. Adequate handwashing sinks properly supplied and accessible

☒ ☐ ☐ ☐

10B. Handwashing sinks accessible with proper signage, handwashing aids

☒ ☐ ☐ ☐

### Approved Sources

11A. Milk, eggs, juice, bottled water, hermetically sealed food, game animals

☒ ☐ ☐ ☐ ☐ ☐

11B. Packaged foods, labeling, whole muscle beef

☒ ☐ ☐ ☐ ☐ ☐

11C. Obtaining raw fish, packaged meat & poultry, eggs

☒ ☐ ☐ ☐ ☐ ☐

12A. Food received at proper temperature

☐ ☐ ☒ ☐ ☐ ☐

12B. Shipping and receiving frozen food

☐ ☐ ☐ ☒ ☐ ☐

13. Food in good condition, honestly presented, safe, & unadulterated

☒ ☐ ☐ ☐

13B. Food package integrity

☒ ☐ ☐ ☐

14A. Required records available: shellstock tags, parasite destruction

☐ ☐ ☐ ☒ ☐ ☐

14B. Missing shellstock tags, destruction

☐ ☐ ☐ ☒ ☐ ☐

14C. Parasite destruction- storing raw/partially cooked fish

☐ ☐ ☐ ☒ ☐ ☐

### Protection from Contamination

15A. Food separated & protected

☒ ☐ ☐ ☐ ☐ ☐

15B. Cleaning equip/utensils/food containers

☒ ☐ ☐ ☐ ☐ ☐

16A. Food-contact surfaces: cleaned & sanitized immersion 171° F and above

☒ ☐ ☐ ☐ ☐

16B. Food contact surfaces cleaned and sanitized NMT 194° F, NLT 180° F

☒ ☐ ☐ ☐ ☐

16C. Mechanical warewashing equipment sanitization food contact surfaces, equip., utensils

☒ ☐ ☐ ☐ ☐

17. Proper disposition of returned, previously served reconditions, & unsafe food

☒ ☐ ☐ ☐

### Time/Temperature Control for Safety Food (TCS Food)

18A. Proper cooking time & temperatures

☐ ☐ ☒ ☐ ☐ ☐

18B. Whole meat cooking and serving, storing

☐ ☐ ☐ ☒ ☐ ☐

18C. Microwave cooking of raw animal foods

☐ ☐ ☐ ☒ ☐ ☐

19. Proper reheating procedures for hot holding

☐ ☐ ☒ ☐ ☐ ☐

*Desh Rish*

Inspector

Acknowledged Receipt :

Page 2 of 5

## Food Establishment Inspection Report - FDA

### Time/Temperature Control for Safety Food (TCS Food)

	IN	OUT	N/O	N/A	COS	REPEAT
20. Proper cooling time & temperatures	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
21. Proper hot holding temperatures	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
22. Proper cold holding temperatures	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
23. Proper Date Marking	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
23B. TCS Foods Disposition	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
24A. Time as a public health control: procedures	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
24B. Time as a public health control: temperatures & discarding food	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
24C. Time as a public health control: highly susceptible population (HSP)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

### Consumer Advisory

	IN	OUT	N/O	N/A	COS	REPEAT
25. Consumer advisory provided for raw or undercooked foods	<input type="radio"/>	<input type="radio"/>		<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

### Highly Susceptible Populations (HSP)

	IN	OUT	N/O	N/A	COS	REPEAT
26A. Pasteurized foods used; prohibited foods not offered	<input type="radio"/>	<input type="radio"/>		<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
26B. Reservice of foods	<input type="radio"/>	<input type="radio"/>		<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

### Chemical

	IN	OUT	N/O	N/A	COS	REPEAT
27. Food additives: approved and properly used	<input type="radio"/>	<input type="radio"/>		<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
28A. Toxic substances identified, stored and used	<input checked="" type="radio"/>	<input type="radio"/>		<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
28B. Poisonous materials, sanitizers, additives, medicines restriction, separation, storage	<input checked="" type="radio"/>	<input type="radio"/>		<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
28C. Conditions of Use: law	<input checked="" type="radio"/>	<input type="radio"/>		<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

### Conformance with Approved Procedures

	IN	OUT	N/O	N/A	COS	REPEAT
29A. Compliance with variance, specialized process, & HACCP plan	<input type="radio"/>	<input type="radio"/>		<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
29B. Treating juice- HACCP, reduced oxygen packaging w/out variance, conformance with approved procedures	<input type="radio"/>	<input type="radio"/>		<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
29C. When HACCP plan is required	<input type="radio"/>	<input type="radio"/>		<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

### GOOD RETAIL PRACTICES

Good Retail Practices are preventative measures to control the addition of pathogens, chemicals, and physical objects into foods.

IN = In compliance OUT = not in compliance COS - corrected on -site during inspection REPEAT = repeat violation

### Safe Food and Water

	IN	OUT	N/O	N/A	COS	REPEAT
30. Pasteurized eggs used where required	<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>
31A. Water & ice from approved source	<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>
31B. Sampling, alternative water supply	<input type="radio"/>	<input type="radio"/>		<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
31C. Sampling report	<input type="radio"/>	<input type="radio"/>		<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
32. Variance obtained for specialized processing methods	<input type="radio"/>	<input type="radio"/>		<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

*Dish Rush*

Inspector

Acknowledged Receipt :

Page 3 of 5

## Food Establishment Inspection Report - FDA

### Food Temperature Control

	IN	OUT	N/O	N/A	COS	REPEAT
33A. Proper cooling methods used; adequate equipment for temperature control	⊙	○			□	□
33B. Frozen food	○	○			□	□
34. Plant food properly cooked for hot holding	○	○	⊙	○	□	□
35. Approved thawing methods used	○	○	○	⊙	□	□
36A. Thermometers provided and accurate	⊙	○			□	□
36B. Thermometers function properly	⊙	○			□	□

### Food Identification

	IN	OUT	COS	REPEAT
37A. Food properly labeled; original container	⊙	○	□	□
37B. Food labels, labeling of ingredients	⊙	○	□	□

### Prevention of Food Contamination

	IN	OUT	COS	REPEAT
38A. Insects, rodents, & animals not present	⊙	○	□	□
38B. Handling prohibition, controlling pests, prohibiting animals	⊙	○	□	□
39A. Contamination prevented during food storage	⊙	○	□	□
39B. Food display; ice used as an exterior coolant prohibited as an ingredient	⊙	○	□	□
39C. Consumer self-service operations- utensils and monitoring	⊙	○	□	□
40A. Personal cleanliness- prohibition jewelry	⊙	○	□	□
40B. Maintenance of fingernails	⊙	○	□	□
41. Wiping cloths; properly used and stored	⊙	○	□	□
42A. Washing Produce - following chemical manufacturers label	⊙	○	□	□
42B. Washing produce	⊙	○	□	□
42C. Washing produce- chemicals	⊙	○	□	□

### Proper Use of Utensils

	IN	OUT	COS	REPEAT
43. In-use utensils; properly stored	⊙	○	□	□
44. Utensils, equipment & linens; properly stored, dried, and handled	⊙	○	□	□
45A. Single-use/ single service articles properly stored and used, required	⊙	○	□	□
45B. Single-use/service articles use limitation, kitchenware and tableware preventing contamination	⊙	○	□	□
46. Gloves used properly	⊙	○	□	□

### Utensils, Equipment and Vending

	IN	OUT	COS	REPEAT
47A. Food & non-food contact surfaces cleanable	⊙	○	□	□
47B. Food contact surfaces /utensils cleanability, molluscan shellfish tanks, consumer self-service	⊙	○	□	□
47C. Properly designed characteristics: food and non-food contact surfaces, molluscan shellfish tanks	⊙	○	□	□

*Dick Rusk*

Inspector

Acknowledged Receipt :

Page 4 of 5

## Food Establishment Inspection Report - FDA

### Utensils, Equipment and Vending

	IN	OUT	COS	REPEAT
48A. Warewashing facilities: installed, maintained, & used; test strips	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
48B. Operational warewashing machines	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
49. Non-food contact surfaces clean	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

### Physical Facilities

	IN	OUT	N/A	COS	REPEAT
50. Hot & cold water available; adequate pressure	<input checked="" type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>
51A. Plumbing installed; proper backflow devices	<input checked="" type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>
51B. Prohibiting a cross-connection, inspection and servicing system	<input checked="" type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>
51C. Approved system and cleanable fixtures, service sink	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
52A. Sewage and waste water properly disposed	<input checked="" type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>
52B. Grease traps easily accessible for cleaning	<input checked="" type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>
52C. Removing mobile food establishment waste	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
53A. Toilet facilities; properly constructed, supplied, & cleaned	<input checked="" type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>
53B. Toilet tissue availability	<input checked="" type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>
54. Garbage & refuse properly disposed; facilities maintained	<input checked="" type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>
55A. Physical facilities installed, maintained, & clean	<input checked="" type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>
55B. Private homes and living or sleeping quarters, use prohibition	<input checked="" type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>
56. Adequate ventilation & lighting; designated areas used	<input checked="" type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>

### MASSACHUSETTS ONLY REGULATIONS

Rules and Regulations adopted for use in Massachusetts only.

### Facilities

	IN	OUT	COS	REPEAT
57A. Catering	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
57B. When plans are reviewed, prerequisite for operations- valid permit	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
57C. Contents of plans and specifications, preoperational inspections	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
58. Mobile Food Operations	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
59. Temporary Food Establishments	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
60. Residential Kitchens	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

### Procedures

	IN	OUT	COS	REPEAT
61. Anti-choking Procedures	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
62. Tobacco Products: Notice and Sale	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
63. Food Allergy Awareness Requirements	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

*Dish Rush*

Inspector

Acknowledged Receipt :

Page 5 of 5



City of Newton  
Health and Human Services  
Deborah Youngblood, PhD, Commissioner  
1000 Commonwealth Ave Newton, MA 02459  
(617) 796-1420



Public Health  
Prevent, Promote, Protect.

Food Establishment Inspection Report - FDA

Insp Date: 6/7/2018  
Business: Franklin School  
125 Derby St.

Business ID: 1N2162

Newton, MA 02465

Inspection: 4N000457

Section: 4

Phone: 617-559-9500

Inspector: 1N11124 Samantha Menard

Reason: 1-Routine

Results: No Follow-up

Inspection Summary

Official Order for Correction: Based on an inspection today, the items checked indicate violations of 105 CMR 590.000/ 2009 Federal Food Code. This report, when signed below by the Commissioner of Health / Agent constitutes an order by the Commissioner of Health. Failure to correct violations cited in this report may result in suspension or revocation of the food establishment permit and cessation of food establishment operations. If aggrieved by this order, you have the right to a hearing. The request must be in writing and submitted to the Commissioner of Health at the above address within 10 days of receipt of this order.

Est. Type 1 - Food Svc Establish License/Permit # \_\_\_\_\_ Risk Category 02 Risk Level Observed 02 Low

FOODBORNE ILLNESS RISK FACTORS AND PUBLIC HEALTH INTERVENTIONS

Compliance status: IN = in compliance OUT = not in compliance N/O = not observed N/A = not applicable

Marked in appropriate box for COS and/or R. COS = corrected on-site during inspection R = repeat violation

Risk factors are improper practices or procedures identified as the most prevalent contributing factors of foodborne illness or injury. Public Health Interventions are control measures to prevent foodborne illnesses or injury.

Supervision

1A. PIC Present

IN OUT N/O N/A COS REPEAT

☒ ☐ ☐ ☐ ☐ ☐

B. Cert. food manager, knowledge, no critical violations

☐ ☒ ☐ ☐ ☐ ☐

Fail Notes 2-102.20

*Food Protection Manager Certification  
[The PIC did not have the food protection manager certification. At least one employee who has a supervisory or management role must be a certified food protection manager.]*

C. Duties of PIC

☒ ☐ ☐ ☐ ☐ ☐

Employee Health

2. Management, food employee and conditional employee; knowledge, responsibilities and reporting

IN OUT N/O N/A COS REPEAT

☒ ☐ ☐ ☐ ☐ ☐

3. Proper use of restriction and exclusion

☒ ☐ ☐ ☐ ☐ ☐

Good Hygienic Practices

IN OUT N/O N/A COS REPEAT

*Samantha Menard*

Inspector

Acknowledged Receipt : Cheryl

Page 1 of 5

## Food Establishment Inspection Report - FDA

### Good Hygienic Practices

4A. Proper eating, tasting, drinking, or tobacco use

IN OUT N/O N/A COS REPEAT  
☒ ☐ ☐ ☐ ☐

B. Preventing contamination when tasting

☒ ☐ ☐ ☐ ☐

5. No discharge from eyes, nose, and mouth

☒ ☐ ☐ ☐ ☐

### Preventing Contamination by Hands

6A. Hands clean & properly washed

☒ ☐ ☐ ☐ ☐

B. Where to wash, hand antiseptics

☒ ☐ ☐ ☐ ☐

7. No bare hand contact with RTE food or a pre-approved alternative procedure properly allowed

☒ ☐ ☐ ☐ ☐ ☐

8A. Adequate handwashing sinks properly supplied and accessible

☒ ☐ ☐ ☐

B. Handwashing sinks accessible with proper signage, handwashing aids

☒ ☐ ☐ ☐

C. Conveniently located handwashing sink

☒ ☐ ☐ ☐

### Approved Sources

9A. Milk, eggs, juice, bottled water, hermetically sealed food

☒ ☐ ☐ ☐

B. Fish and shellfish

☐ ☐ ☐ ☒ ☐ ☐

10. Food received at proper temperature

☐ ☐ ☒ ☐ ☐ ☐

11. Food in good condition, safe, & unadulterated

☒ ☐ ☐ ☐

### Protection from Contamination

12A. Food separated & protected

☒ ☐ ☐ ☐ ☐ ☐

B. Gloves, use limitation, one task- contaminated

☒ ☐ ☐ ☐ ☐ ☐

13A. Food-contact surfaces: cleaned & sanitized 171° F

☒ ☐ ☐ ☐ ☐

B. Food contact surfaces cleaned and sanitized NMT 194° F, NLT 180° F

☐ ☐ ☒ ☐ ☐

C. Mechanical warewashing equipment sanitization food contact surfaces, equip., utensils

☒ ☐ ☐ ☐ ☐

14. Proper disposition of returned, previously served reconditions, & unsafe food

☒ ☐ ☐ ☐

### Potentially Hazardous Food Time/Temperature

15. Proper cooking time & temperatures

☒ ☐ ☐ ☐ ☐ ☐

16. Proper reheating procedures for hot holding

☒ ☐ ☐ ☐ ☐ ☐

17. Proper cooling time & temperatures

☐ ☐ ☐ ☒ ☐ ☐

18. Proper hot holding temperatures

☒ ☐ ☐ ☐ ☐ ☐

19. Proper cold holding temperatures

☒ ☐ ☐ ☐ ☐ ☐

20. Time as a public health control: procedures & record

☐ ☐ ☐ ☒ ☐ ☐

### Highly Susceptible Populations

21. Pasteurized foods used; prohibited foods not offered

IN OUT N/O N/A COS REPEAT  
☐ ☐ ☐ ☒ ☐ ☐

### Chemical

IN OUT N/O N/A COS REPEAT

*S. M. M. M.*

Inspector

Acknowledged Receipt : Cheryl

Page 2 of 5

## Food Establishment Inspection Report - FDA

Chemical		IN	OUT	N/O	N/A	COS	REPEAT
22. Food additives: approved and properly used		<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>	
23A. Toxic substances properly identified, stored and used		<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
Fail Notes	7-102.11	*Common Name - Working Containers [Windex stored in an unmarked bottle. Working containers must be labeled with the chemicals common name.]					
B. Restriction presence and use, restriction and storage of medicines		<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>	
C. Storage- other personal care items		<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>	

### GOOD RETAIL PRACTICES

Good Retail Practices are preventative measures to control the addition of pathogens, chemicals, and physical objects into foods.

IN = In compliance OUT = not in compliance COS - corrected on -site during inspection REPEAT = repeat violation

Safe Food and Water		IN	OUT	N/O	N/A	COS	REPEAT
24. Water & ice from approved source		<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
Food Temperature Control		IN	OUT	N/O	N/A	COS	REPEAT
25A. Proper cooling methods used; adequate equipment for temperature control		<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
B. Frozen food		<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
26. Plant food properly cooked for hot holding		<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
27. Approved thawing methods used		<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
28A. Thermometers provided and accurate		<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
B. Thermometers function properly		<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
Food Identification		IN	OUT	COS	REPEAT		
29A. Food properly labeled; original container		<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>		
B. Food labels, labeling of ingredients		<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>		
Prevention of Food Contamination		IN	OUT	COS	REPEAT		
30A. Insects, rodents, & animals not present		<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>		
B. Handling prohibition, controlling pests, prohibiting animals		<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>		
31A. Contamination prevented during food storage		<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>		
B. Food display; ice used as an exterior coolant prohibited as an ingredient		<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>		
C. Consumer self-service operations- utensils and monitoring		<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>		
32A. Personal cleanliness- prohibition jewelry		<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>		
B. Maintenance of fingernails		<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>		
33. Wiping cloths; properly used and stored		<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>		
34. Washing fruits & vegetables		<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>		
Proper Use of Utensils		IN	OUT	COS	REPEAT		
35. In-use utensils; properly stored		<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>		



Inspector

Acknowledged Receipt : Cheryl

Page 3 of 5

## Food Establishment Inspection Report - FDA

### Proper Use of Utensils

	IN	OUT	COS	REPEAT
36. Utensils, equipment & linens; properly stored, dried, and handled	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
37A. Single-use/ single service articles properly stored and used, required	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
B. Single-use/service articles use limitation, kitchenware and tableware preventing contamination	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
38. Gloves used properly	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

### Utensils, Equipment and Vending

	IN	OUT	COS	REPEAT
39A. Food & non-food contact surfaces cleanable	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
<i>Fail Notes</i>   4-501.11 <i>Good repair and proper adjustment</i> <i>[There was a leak in the refrigerator. PIC had placed a clean bucket under the leak to stop it from contaminating food and also claimed it was scheduled to be repaired on June 8th. Ensure all equipment is maintained in a state of good repair.]</i>				
B. Food contact surfaces /utensils cleanability, molluscan shellfish tanks, consumer self-servic	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
C. Properly designed characteristics: food and non-food contact surfaces, molluscan shellfish tanks	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
40A. Warewashing facilities: installed, maintained, & used; test strips	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
B. Operational warewashing machines	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
41. Non-food contact surfaces clean	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

### Physical Facilities

	IN	OUT	N/O	N/A	COS	REPEAT
42. Hot & cold water available; adequate pressure	<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>
43A. Plumbing installed; proper backflow devices	<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>
B. Prohibiting a cross-connection, non-drinking water, system maintained in good repair	<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>
C. Approved system and cleanable fixtures, service sink	<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>
44A. Sewage and waste water properly disposed	<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>
B. Grease traps easily accessible for cleaning	<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>
45A. Toilet facilities; properly constructed, supplied, & cleaned	<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>
B. Toilet tissue availability	<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>
46. Garbage & refuse properly disposed; facilities maintained	<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>
47A. Physical facilities installed, maintained, & clean	<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>
B. Cleaning maintenance tools, preventing contamination	<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>
48. Adequate ventilation & lighting; designated areas used	<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>

### MASSACHUSETTS ONLY REGULATIONS

Rules and Regulations adopted for use in Massachusetts only.

#### Facilities

	IN	OUT	COS	REPEAT
49A. When plans are reviewed, prerequisite for operations- valid permit	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

*Sarah Monahan*

Inspector

Acknowledged Receipt : Cheryl

Page 4 of 5

## Food Establishment Inspection Report - FDA

### Facilities

B. Contents of plans and specifications, preoperational inspections

IN OUT COS REPEAT

☐ ☐ ☐ ☐

### Procedures

50. Anti-choking Procedures

☒ ☐ ☐ ☐

51. Tobacco Products: Notice and Sale

☐ ☐ ☐ ☐



Inspector

Acknowledged Receipt : Cheryl

Page 5 of 5



City of Newton  
Health and Human Services  
Deborah Youngblood, PhD, Commissioner  
1000 Commonwealth Ave Newton, MA 02459  
(617) 796-1420



Public Health  
Prevent, Promote, Protect

Food Establishment Inspection Report - FDA

Insp Date: 11/8/2018 Business ID: 1N2162

Business: Franklin School  
125 Derby St.

Newton, MA 02465

Inspection: 6N000063

Section: 4

Phone: 617-559-9500

Inspector: 1N11123 Nicola Assan

Reason: 1-Routine

Results: No Follow-up R2

Inspection Summary

Official Order for Correction: Based on an inspection today, the items checked indicate violations of 105 CMR 590.000/ 2013 Federal Food Code. This report, when signed below by the Commissioner of Health / Agent constitutes an order by the Commissioner of Health. Failure to correct violations cited in this report may result in suspension or revocation of the food establishment permit and cessation of food establishment operations. If aggrieved by this order, you have the right to a hearing. The request must be in writing and submitted to the Commissioner of Health at the above address within 10 days of receipt of this order.

Est. Type 1 - Food Svc Establis License/Permit # \_\_\_\_\_ Risk Category 02 Risk Level Observed 02 Low

Foodborne Illness Complaint Investigated (All) ☐ Involving More Than Two Persons ☐

FOODBORNE ILLNESS RISK FACTORS AND PUBLIC HEALTH INTERVENTIONS

Compliance status: IN = in compliance OUT = not in compliance N/O = not observed N/A = not applicable

Marked in appropriate box for COS and/or R. COS = corrected on-site during inspection R = repeat violation

Risk factors are improper practices or procedures identified as the most prevalent contributing factors of foodborne illness or injury. Public Health Interventions are control measures to prevent foodborne illnesses or injury.

Supervision

1. PIC Present, Knowledge and Duties

IN	OUT	N/O	N/A	COS	REPEAT
<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>

2. Certified Food Protection Manager

<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>
----------------------------------	-----------------------	-----------------------	--	--------------------------	--------------------------

*This item has Notes. See Footnote 1 at end of questionnaire.*

Employee Health / Responding to Contamination Events

3A. Employee Health: PIC Knowledge, Responsibilities & Reporting

<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>
----------------------------------	-----------------------	--	--	--------------------------	--------------------------

3B. Employee Reporting to PIC

<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>
----------------------------------	-----------------------	--	--	--------------------------	--------------------------

4. Proper Use of Restriction & Exclusion

<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>
----------------------------------	-----------------------	--	--	--------------------------	--------------------------

5. Clean-up of Vomiting and Diarrheal Events

<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>
----------------------------------	-----------------------	--	--	--------------------------	--------------------------

Good Hygienic Practices

6A. Proper eating, tasting, drinking, or tobacco use

<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>
----------------------------------	-----------------------	-----------------------	--	--------------------------	--------------------------

6B. Preventing contamination when tasting

<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>
----------------------------------	-----------------------	-----------------------	--	--------------------------	--------------------------

*Assan*

Inspector

Acknowledged Receipt : Tim Viveiros

Page 1 of 7

## Food Establishment Inspection Report - FDA

### Good Hygienic Practices

7. No discharge from eyes, nose, and mouth

IN	OUT	N/O	N/A	COS	REPEAT
<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>

### Control of Hands as a Vehicle of Contamination

8A. Hands clean & properly washed

IN	OUT	N/O	N/A	COS	REPEAT
<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>

8B. Where to wash, hand antiseptics

IN	OUT	N/O	N/A	COS	REPEAT
<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>

9. No bare hand contact with RTE food or a pre-approved alternative procedure properly allowed

IN	OUT	N/O	N/A	COS	REPEAT
<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

10A. Adequate handwashing sinks properly supplied and accessible

IN	OUT	N/O	N/A	COS	REPEAT
<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>

10B. Handwashing sinks accesible with proper signage, handwashing aids

IN	OUT	N/O	N/A	COS	REPEAT
<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>

### Approved Sources

11A. Milk, eggs, juice, bottled water, hermetically sealed food, game animals

IN	OUT	N/O	N/A	COS	REPEAT
<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

11B. Packaged foods, labeling, whole muscle beef

IN	OUT	N/O	N/A	COS	REPEAT
<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

11C. Obtaining raw fish, packaged meat & poultry, eggs

IN	OUT	N/O	N/A	COS	REPEAT
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

12A. Food received at proper temperature

IN	OUT	N/O	N/A	COS	REPEAT
<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

12B. Shipping and receiving frozen food

IN	OUT	N/O	N/A	COS	REPEAT
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

13. Food in good condition, honestly presented, safe, & unadulterated

IN	OUT	N/O	N/A	COS	REPEAT
<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>

13B. Food package integrity

IN	OUT	N/O	N/A	COS	REPEAT
<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>

14A. Required records available: shellstock tags, parasite destruction

IN	OUT	N/O	N/A	COS	REPEAT
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

14B. Missing shellstock tags, destruction

IN	OUT	N/O	N/A	COS	REPEAT
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

14C. Parasite destruction- storing raw/partially cooked fish

IN	OUT	N/O	N/A	COS	REPEAT
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

### Protection from Contamination

15A. Food separated & protected

IN	OUT	N/O	N/A	COS	REPEAT
<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

15B. Cleaning equip/utensils/food containers

IN	OUT	N/O	N/A	COS	REPEAT
<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

16A. Food-contact surfaces: cleaned & sanitized immersion 171° F and above

IN	OUT	N/O	N/A	COS	REPEAT
<input type="radio"/>	<input checked="" type="radio"/>		<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

Fail Notes 4-501.114 (A-E, F 1&2)

*Chemical Sanitization - Temperature, pH, Concentration and Hardness  
[The temperature of the sanitizing solution was recorded as 63.5 degrees fahrenheit. A quaternary ammonium compound solution shall have a minimum temperature of 75 degrees fahrenheit. This is because the effectiveness of chemical sanitizers can be directly affected by the temperature of the water. Also see footnotes for violation #48A.]*

16B. Food contact surfaces cleaned and sanitized NMT 194° F, NLT 180° F

IN	OUT	N/O	N/A	COS	REPEAT
<input checked="" type="radio"/>	<input type="radio"/>		<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

16C. Mechanical warewashing equipment sanitization food contact surfaces, equip., utensils

IN	OUT	N/O	N/A	COS	REPEAT
<input checked="" type="radio"/>	<input type="radio"/>		<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

17. Proper disposition of returned, previously served reconditions, & unsafe food

IN	OUT	N/O	N/A	COS	REPEAT
<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>

### Time/Temperature Control for Safety Food (TCS Food)

IN	OUT	N/O	N/A	COS	REPEAT
----	-----	-----	-----	-----	--------

*Nasser*

Inspector

Acknowledged Receipt : Tim Viveiros

Page 2 of 7

## Food Establishment Inspection Report - FDA

Time/Temperature Control for Safety Food (TCS Food)	IN	OUT	N/O	N/A	COS	REPEAT
18A. Proper cooking time & temperatures	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
18B. Whole meat cooking and serving, storing	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
18C. Microwave cooking of raw animal foods	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
19. Proper reheating procedures for hot holding	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
20. Proper cooling time & temperatures	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
21. Proper hot holding temperatures	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
22. Proper cold holding temperatures	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
23. Proper Date Marking	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
23B. TCS Foods Disposition	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
24A. Time as a public health control: procedures	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
24B. Time as a public health control: temperatures & discarding food	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
24C. Time as a public health control: highly susceptible population (HSP)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

Consumer Advisory	IN	OUT	N/O	N/A	COS	REPEAT
25. Consumer advisory provided for raw or undercooked foods	<input type="radio"/>	<input type="radio"/>		<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

Highly Susceptible Populations (HSP)	IN	OUT	N/O	N/A	COS	REPEAT
26A. Pasteurized foods used; prohibited foods not offered	<input type="radio"/>	<input type="radio"/>		<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
26B. Reservice of foods	<input type="radio"/>	<input type="radio"/>		<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

Chemical	IN	OUT	N/O	N/A	COS	REPEAT
27. Food additives: approved and properly used	<input type="radio"/>	<input type="radio"/>		<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
28A. Toxic substances identified, stored and used	<input checked="" type="radio"/>	<input type="radio"/>		<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
28B. Poisonous materials, sanitizers, additives, medicines restriction, separation, storage	<input checked="" type="radio"/>	<input type="radio"/>		<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
28C. Conditions of Use: law	<input checked="" type="radio"/>	<input type="radio"/>		<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

Conformance with Approved Procedures	IN	OUT	N/O	N/A	COS	REPEAT
29A. Compliance with variance, specialized process, & HACCP plan	<input type="radio"/>	<input type="radio"/>		<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
29B. Treating juice- HACCP, reduced oxygen packaging w/out variance, conformance with approved procedures	<input type="radio"/>	<input type="radio"/>		<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
29C. When HACCP plan is required	<input type="radio"/>	<input type="radio"/>		<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

### GOOD RETAIL PRACTICES

Good Retail Practices are preventative measures to control the addition of pathogens, chemicals, and physical objects into foods.

IN = In compliance   OUT = not in compliance   COS - corrected on -site during inspection   REPEAT = repeat violation

Safe Food and Water	IN	OUT	N/O	N/A	COS	REPEAT
30. Pasteurized eggs used where required	<input type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>

*Nassan*

Inspector

Acknowledged Receipt : Tim Viveiros

Page 3 of 7

## Food Establishment Inspection Report - FDA

### Safe Food and Water

	IN	OUT	N/O	N/A	COS	REPEAT
31A. Water & ice from approved source	<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>
31B. Sampling, alternative water supply	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>
31C. Sampling report	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>
32. Variance obtained for specialized processing methods	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>

### Food Temperature Control

	IN	OUT	N/O	N/A	COS	REPEAT
33A. Proper cooling methods used; adequate equipment for temperature control	<input type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>
33B. Frozen food	<input type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>
34. Plant food properly cooked for hot holding	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
35. Approved thawing methods used	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
36A. Thermometers provided and accurate	<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>
36B. Thermometers function properly	<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>

### Food Identification

	IN	OUT	COS	REPEAT
37A. Food properly labeled; original container	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
37B. Food labels, labeling of ingredients	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

### Prevention of Food Contamination

	IN	OUT	COS	REPEAT
38A. Insects, rodents, & animals not present	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
38B. Handling prohibition, controlling pests, prohibiting animals	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
39A. Contamination prevented during food storage	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
39B. Food display; ice used as an exterior coolant prohibited as an ingredient	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
39C. Consumer self-service operations- utensils and monitoring	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
40A. Personal cleanliness- prohibition jewelry	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
40B. Maintenance of fingernails	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
41. Wiping cloths; properly used and stored	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
42A. Washing Produce - following chemical manufacturers label	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
42B. Washing produce	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
42C. Washing produce- chemicals	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

### Proper Use of Utensils

	IN	OUT	COS	REPEAT
43. In-use utensils; properly stored	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
44. Utensils, equipment & linens; properly stored, dried, and handled	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
45A. Single-use/ single service articles properly stored and used, required	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
45B. Single-use/service articles use limitation, kitchenware and tableware preventing contamination	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
46. Gloves used properly	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

*Nassan*

Inspector

Acknowledged Receipt : Tim Viveiros

Page 4 of 7

## Food Establishment Inspection Report - FDA

### Utensils, Equipment and Vending

	IN	OUT	COS	REPEAT
47A. Food & non-food contact surfaces cleanable	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
47B. Food contact surfaces /utensils cleanability, molluscan shellfish tanks, consumer self-service	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
47C. Properly designed characteristics: food and non-food contact surfaces, molluscan shellfish tanks	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
48A. Warewashing facilities: installed, maintained, & used; test strips	<input type="radio"/>	<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

**This item has Notes. See Footnote 2 at end of questionnaire.**

**Fail Notes**    4-501.19    *Manual warewashing equipment, wash solution temperature*  
*[The temperature of the wash solution in the 3 bay compartment sink was 95.0 degrees fahrenheit. The temperature of the wash solution in manual WAREWASHING EQUIPMENT shall be maintained at not less than 110 degrees fahrenheit or the temperature specified on the cleaning agent manufacturer's label instructions.]*

48B. Operational warewashing machines	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
49. Non-food contact surfaces clean	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

### Physical Facilities

	IN	OUT	N/A	COS	REPEAT
50. Hot & cold water available; adequate pressure	<input checked="" type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>
51A. Plumbing installed; proper backflow devices	<input checked="" type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>
51B. Prohibiting a cross-connection, inspection and servicing system	<input checked="" type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>
51C. Approved system and cleanable fixtures, service sink	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
52A. Sewage and waste water properly disposed	<input checked="" type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>
52B. Grease traps easily accessible for cleaning	<input type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>
52C. Removing mobile food establishment waste	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
53A. Toilet facilities; properly constructed, supplied, & cleaned	<input checked="" type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>
53B. Toilet tissue availability	<input checked="" type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>
54. Garbage & refuse properly disposed; facilities maintained	<input checked="" type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>
55A. Physical facilities installed, maintained, & clean	<input checked="" type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>
55B. Private homes and living or sleeping quarters, use prohibition	<input checked="" type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>
56. Adequate ventilation & lighting; designated areas used	<input checked="" type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>

### MASSACHUSETTS ONLY REGULATIONS

Rules and Regulations adopted for use in Massachusetts only.

#### Facilities

	IN	OUT	COS	REPEAT
57A. Catering	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
57B. When plans are reviewed, prerequisite for operations- valid permit	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
57C. Contents of plans and specifications, preoperational inspections	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
58. Mobile Food Operations	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

*Nasson*

Inspector

Acknowledged Receipt : Tim Viveiros

Page 5 of 7

## Food Establishment Inspection Report - FDA

### Facilities

59. Temporary Food Establishments

IN OUT COS REPEAT

☐ ☐ ☐ ☐

60. Residential Kitchens

☐ ☐ ☐ ☐

### Procedures

61. Anti-choking Procedures

☐ ☐ ☐ ☐

62. Tobacco Products: Notice and Sale

☐ ☐ ☐ ☐

63. Food Allergy Awareness Requirements

☐ ☐ ☐ ☐

*Nassan*

Inspector

Acknowledged Receipt : Tim Viveiros

Page 6 of 7

## Food Establishment Inspection Report - FDA

### **Footnote 1**

**Notes:**

PIC to attend serve safe cert course on 12th November 2018 along with other NPS food handlers working in the school kitchens.

### **Footnote 2**

**Notes:**

The PIC informed me that the temperature of the hot water does not reach the minimum requirements and so is always cold or luke warm at best. I tested the running hot water and it did not get above 95 deg F.

If the temperature is below 110 deg F the performance of the detergent may be adversely affected, for example, animal fats that may be present on the dirty dishes would not be dissolved.

The hot water system must be checked so that the correct temperatures required in the Food Code are maintained.



Inspector

Acknowledged Receipt : Tim Viveiros

Page 7 of 7



City of Newton  
Health and Human Services  
Deborah Youngblood, PhD, Commissioner  
1000 Commonwealth Ave Newton, MA 02459  
(617) 796-1420



Public Health  
Prevent. Promote. Protect.

Food Establishment Inspection Report - FDA

Insp Date: 5/2/2019  
Business: Franklin School  
125 Derby St.

Business ID: 1N2162

Newton, MA 02465

Inspection: 6N000112

Section: 4

Phone: 617-559-9500

Inspector: 1N11123 Nicola Assan

Reason: 1-Routine

Results: No Follow-up R2

Inspection Summary

Official Order for Correction: Based on an inspection today, the items checked indicate violations of 105 CMR 590.000/ 2013 Federal Food Code. This report, when signed below by the Commissioner of Health / Agent constitutes an order by the Commissioner of Health. Failure to correct violations cited in this report may result in suspension or revocation of the food establishment permit and cessation of food establishment operations. If aggrieved by this order, you have the right to a hearing. The request must be in writing and submitted to the Commissioner of Health at the above address within 10 days of receipt of this order.

Est. Type 1 - Food Svc Establis License/Permit # \_\_\_\_\_ Risk Category 02 Risk Level Observed 02 Low

Foodborne Illness Complaint Investigated (All) ☐ Involving More Than Two Persons ☐

FOODBORNE ILLNESS RISK FACTORS AND PUBLIC HEALTH INTERVENTIONS

Compliance status: IN = in compliance OUT = not in compliance N/O = not observed N/A = not applicable

Marked in appropriate box for COS and/or R. COS = corrected on-site during inspection R = repeat violation

Risk factors are improper practices or procedures identified as the most prevalent contributing factors of foodborne illness or injury. Public Health Interventions are control measures to prevent foodborne illnesses or injury.

Supervision

1. PIC Present, Knowledge and Duties

IN	OUT	N/O	N/A	COS	REPEAT
<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>

2. Certified Food Protection Manager

<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>
----------------------------------	-----------------------	-----------------------	--	--------------------------	--------------------------

Employee Health / Responding to Contamination Events

3A. Employee Health: PIC Knowledge, Responsibilities & Reporting

<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>
----------------------------------	-----------------------	--	--	--------------------------	--------------------------

3B. Employee Reporting to PIC

<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>
----------------------------------	-----------------------	--	--	--------------------------	--------------------------

4. Proper Use of Restriction & Exclusion

<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>
----------------------------------	-----------------------	--	--	--------------------------	--------------------------

5. Clean-up of Vomiting and Diarrheal Events

<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>
----------------------------------	-----------------------	--	--	--------------------------	--------------------------

Good Hygienic Practices

6A. Proper eating, tasting, drinking, or tobacco use

<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>
----------------------------------	-----------------------	-----------------------	--	--------------------------	--------------------------

6B. Preventing contamination when tasting

<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>
----------------------------------	-----------------------	-----------------------	--	--------------------------	--------------------------

Inspector

Acknowledged Receipt : Tim Viveiros

Page 1 of 5

## Food Establishment Inspection Report - FDA

### Good Hygienic Practices

7. No discharge from eyes, nose, and mouth

IN	OUT	N/O	N/A	COS	REPEAT
<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>

### Control of Hands as a Vehicle of Contamination

8A. Hands clean & properly washed

IN	OUT	N/O	N/A	COS	REPEAT
<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>

8B. Where to wash, hand antiseptics

IN	OUT	N/O	N/A	COS	REPEAT
<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>

9. No bare hand contact with RTE food or a pre-approved alternative procedure properly allowed

IN	OUT	N/O	N/A	COS	REPEAT
<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

10A. Adequate handwashing sinks properly supplied and accessible

IN	OUT	N/O	N/A	COS	REPEAT
<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>

10B. Handwashing sinks accesible with proper signage, handwashing aids

IN	OUT	N/O	N/A	COS	REPEAT
<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>

### Approved Sources

11A. Milk, eggs, juice, bottled water, hermetically sealed food, game animals

IN	OUT	N/O	N/A	COS	REPEAT
<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

11B. Packaged foods, labeling, whole muscle beef

IN	OUT	N/O	N/A	COS	REPEAT
<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

11C. Obtaining raw fish, packaged meat & poultry, eggs

IN	OUT	N/O	N/A	COS	REPEAT
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

12A. Food received at proper temperature

IN	OUT	N/O	N/A	COS	REPEAT
<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

12B. Shipping and receiving frozen food

IN	OUT	N/O	N/A	COS	REPEAT
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

13. Food in good condition, honestly presented, safe, & unadulterated

IN	OUT	N/O	N/A	COS	REPEAT
<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>

13B. Food package integrity

IN	OUT	N/O	N/A	COS	REPEAT
<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>

14A. Required records available: shellstock tags, parasite destruction

IN	OUT	N/O	N/A	COS	REPEAT
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

14B. Missing shellstock tags, destruction

IN	OUT	N/O	N/A	COS	REPEAT
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

14C. Parasite destruction- storing raw/partially cooked fish

IN	OUT	N/O	N/A	COS	REPEAT
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

### Protection from Contamination

15A. Food separated & protected

IN	OUT	N/O	N/A	COS	REPEAT
<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

15B. Cleaning equip/utensils/food containers

IN	OUT	N/O	N/A	COS	REPEAT
<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

16A. Food-contact surfaces: cleaned & sanitized immersion 171° F and above

IN	OUT	N/O	N/A	COS	REPEAT
<input checked="" type="radio"/>	<input type="radio"/>		<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

16B. Food contact surfaces cleaned and sanitized NMT 194° F, NLT 180° F

IN	OUT	N/O	N/A	COS	REPEAT
<input checked="" type="radio"/>	<input type="radio"/>		<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

16C. Mechanical warewashing equipment sanitization food contact surfaces, equip., utensils

IN	OUT	N/O	N/A	COS	REPEAT
<input checked="" type="radio"/>	<input type="radio"/>		<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

17. Proper disposition of returned, previously served reconditions, & unsafe food

IN	OUT	N/O	N/A	COS	REPEAT
<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>

### Time/Temperature Control for Safety Food (TCS Food)

18A. Proper cooking time & temperatures

IN	OUT	N/O	N/A	COS	REPEAT
<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

18B. Whole meat cooking and serving, storing

IN	OUT	N/O	N/A	COS	REPEAT
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

18C. Microwave cooking of raw animal foods

IN	OUT	N/O	N/A	COS	REPEAT
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

19. Proper reheating procedures for hot holding

IN	OUT	N/O	N/A	COS	REPEAT
<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

20. Proper cooling time & temperatures

IN	OUT	N/O	N/A	COS	REPEAT
<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

21. Proper hot holding temperatures

IN	OUT	N/O	N/A	COS	REPEAT
<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>



Inspector

Acknowledged Receipt : Tim Viveiros

Page 2 of 5

## Food Establishment Inspection Report - FDA

Time/Temperature Control for Safety Food (TCS Food)	IN	OUT	N/O	N/A	COS	REPEAT
22. Proper cold holding temperatures	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
23. Proper Date Marking	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
23B. TCS Foods Disposition	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
24A. Time as a public health control: procedures	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
24B. Time as a public health control: temperatures & discarding food	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
24C. Time as a public health control: highly susceptible population (HSP)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

## Consumer Advisory

IN	OUT	N/O	N/A	COS	REPEAT
<input type="radio"/>	<input type="radio"/>		<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

### Highly Susceptible Populations (HSP)

IN	OUT	N/O	N/A	COS	REPEAT
<input type="radio"/>	<input type="radio"/>		<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="radio"/>	<input type="radio"/>		<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

## Chemical

IN	OUT	N/O	N/A	COS	REPEAT
<input type="radio"/>	<input type="radio"/>		<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input checked="" type="radio"/>	<input type="radio"/>		<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input checked="" type="radio"/>	<input type="radio"/>		<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input checked="" type="radio"/>	<input type="radio"/>		<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

### Conformance with Approved Procedures

IN	OUT	N/O	N/A	COS	REPEAT
<input type="radio"/>	<input type="radio"/>		<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="radio"/>	<input type="radio"/>		<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="radio"/>	<input type="radio"/>		<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

## GOOD RETAIL PRACTICES

Good Retail Practices are preventative measures to control the addition of pathogens, chemicals, and physical objects into foods.

IN = In compliance    OUT = not in compliance    COS - corrected on -site during inspection    REPEAT = repeat violation

## Safe Food and Water

IN	OUT	N/O	N/A	COS	REPEAT
○	○			<input type="checkbox"/>	<input type="checkbox"/>
⊙	○			<input type="checkbox"/>	<input type="checkbox"/>
○	○		⊙	<input type="checkbox"/>	<input type="checkbox"/>
○	○		⊙	<input type="checkbox"/>	<input type="checkbox"/>
○	○		⊙	<input type="checkbox"/>	<input type="checkbox"/>

## Food Temperature Control

IN	OUT	N/O	N/A	COS	REPEAT
<input type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>

Mossan

Inspector

**Acknowledged Receipt : Tim Viveiros**

## Food Establishment Inspection Report - FDA

Food Temperature Control	IN	OUT	N/O	N/A	COS	REPEAT
33B. Frozen food	<input type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>
34. Plant food properly cooked for hot holding	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
35. Approved thawing methods used	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
36A. Thermometers provided and accurate	<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>
36B. Thermometers function properly	<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>

Food Identification	IN	OUT	COS	REPEAT
37A. Food properly labeled; original container		<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
37B. Food labels, labeling of ingredients		<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

Prevention of Food Contamination	IN	OUT	COS	REPEAT
38A. Insects, rodents, & animals not present	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
38B. Handling prohibition, controlling pests, prohibiting animals	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
39A. Contamination prevented during food storage	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
39B. Food display; ice used as an exterior coolant prohibited as an ingredient	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
39C. Consumer self-service operations- utensils and monitoring	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
40A. Personal cleanliness- prohibition jewelry	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
40B. Maintenance of fingernails	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
41. Wiping cloths; properly used and stored	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
42A. Washing Produce - following chemical manufacturers label	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
42B. Washing produce	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
42C. Washing produce- chemicals	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

Proper Use of Utensils	IN	OUT	COS	REPEAT
43. In-use utensils; properly stored	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
44. Utensils, equipment & linens; properly stored, dried, and handled	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
45A. Single-use/ single service articles properly stored and used, required	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
45B. Single-use/service articles use limitation, kitchenware and tableware preventing contamination	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
46. Gloves used properly	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

Utensils, Equipment and Vending	IN	OUT	COS	REPEAT
47A. Food & non-food contact surfaces cleanable	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
47B. Food contact surfaces /utensils cleanability, molluscan shellfish tanks, consumer self-service	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
47C. Properly designed characteristics: food and non-food contact surfaces, molluscan shellfish tanks	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
48A. Warewashing facilities: installed, maintained, & used; test strips	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
48B. Operational warewashing machines	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>



Inspector

Acknowledged Receipt : Tim Viveiros

Page 4 of 5

## Food Establishment Inspection Report - FDA

### Utensils, Equipment and Vending

49. Non-food contact surfaces clean

IN	OUT	COS	REPEAT
<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

### Physical Facilities

50. Hot & cold water available; adequate pressure

IN	OUT	N/A	COS	REPEAT
<input checked="" type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>

51A. Plumbing installed; proper backflow devices

<input checked="" type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>
----------------------------------	-----------------------	--	--------------------------	--------------------------

51B. Prohibiting a cross-connection, inspection and servicing system

<input checked="" type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>
----------------------------------	-----------------------	--	--------------------------	--------------------------

51C. Approved system and cleanable fixtures, service sink

<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
----------------------------------	-----------------------	-----------------------	--------------------------	--------------------------

52A. Sewage and waste water properly disposed

<input checked="" type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>
----------------------------------	-----------------------	--	--------------------------	--------------------------

52B. Grease traps easily accessible for cleaning

<input checked="" type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>
----------------------------------	-----------------------	--	--------------------------	--------------------------

52C. Removing mobile food establishment waste

<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
-----------------------	-----------------------	----------------------------------	--------------------------	--------------------------

53A. Toilet facilities; properly constructed, supplied, & cleaned

<input checked="" type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>
----------------------------------	-----------------------	--	--------------------------	--------------------------

53B. Toilet tissue availability

<input checked="" type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>
----------------------------------	-----------------------	--	--------------------------	--------------------------

54. Garbage & refuse properly disposed; facilities maintained

<input checked="" type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>
----------------------------------	-----------------------	--	--------------------------	--------------------------

55A. Physical facilities installed, maintained, & clean

<input checked="" type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>
----------------------------------	-----------------------	--	--------------------------	--------------------------

55B. Private homes and living or sleeping quarters, use prohibition

<input checked="" type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>
----------------------------------	-----------------------	--	--------------------------	--------------------------

56. Adequate ventilation & lighting; designated areas used

<input checked="" type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>
----------------------------------	-----------------------	--	--------------------------	--------------------------

### MASSACHUSETTS ONLY REGULATIONS

Rules and Regulations adopted for use in Massachusetts only.

#### Facilities

57A. Catering

IN	OUT	COS	REPEAT
<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

57B. When plans are reviewed, prerequisite for operations- valid permit

<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
-----------------------	-----------------------	--------------------------	--------------------------

57C. Contents of plans and specifications, preoperational inspections

<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
-----------------------	-----------------------	--------------------------	--------------------------

58. Mobile Food Operations

<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
-----------------------	-----------------------	--------------------------	--------------------------

59. Temporary Food Establishments

<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
-----------------------	-----------------------	--------------------------	--------------------------

60. Residential Kitchens

<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
-----------------------	-----------------------	--------------------------	--------------------------

#### Procedures

61. Anti-choking Procedures

<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
-----------------------	-----------------------	--------------------------	--------------------------

62. Tobacco Products: Notice and Sale

<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
-----------------------	-----------------------	--------------------------	--------------------------

63. Food Allergy Awareness Requirements

<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
-----------------------	-----------------------	--------------------------	--------------------------

*Massan*

Inspector

Acknowledged Receipt : Tim Viveiros

Page 5 of 5



City of Newton  
Health and Human Services  
Deborah Youngblood, PhD, Commissioner  
1000 Commonwealth Ave Newton, MA 02459  
(617) 796-1420



Public Health  
Prevent. Promote. Protect.

Food Establishment Inspection Report - FDA

Insp Date: 12/14/2017 Business ID: 1N2187

Business: Horace Mann School  
687 Watertown St.

Newton, MA 02460

Inspection: 6N000009

Section: 4

Phone: 559-9510

Inspector: 1N11123 Nicola Assan

Reason: 1-Routine

Results: No Follow-up R2

Inspection Summary

Official Order for Correction: Based on an inspection today, the items checked indicate violations of 105 CMR 590.000/ 2013 Federal Food Code. This report, when signed below by the Commissioner of Health / Agent constitutes an order by the Commissioner of Health. Failure to correct violations cited in this report may result in suspension or revocation of the food establishment permit and cessation of food establishment operations. If aggrieved by this order, you have the right to a hearing. The request must be in writing and submitted to the Commissioner of Health at the above address within 10 days of receipt of this order.

Est. Type 1 - Food Svc Establis License/Permit # \_\_\_\_\_ Risk Category 02 Risk Level Observed 02 Low

Foodborne Illness Complaint Investigated (All) ☐ Involving More Than Two Persons ☐

FOODBORNE ILLNESS RISK FACTORS AND PUBLIC HEALTH INTERVENTIONS

Compliance status: IN = in compliance OUT = not in compliance N/O = not observed N/A = not applicable

Marked in appropriate box for COS and/or R. COS = corrected on-site during inspection R = repeat violation

Risk factors are improper practices or procedures identified as the most prevalent contributing factors of foodborne illness or injury. Public Health Interventions are control measures to prevent foodborne illnesses or injury.

Supervision

1. PIC Present, Knowledge and Duties

IN	OUT	N/O	N/A	COS	REPEAT
<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>

2. Certified Food Protection Manager

<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>
----------------------------------	-----------------------	-----------------------	--	--------------------------	--------------------------

***This item has Notes. See Footnote 1 at end of questionnaire.***

Employee Health / Responding to Contamination Events

3A. Employee Health: PIC Knowledge, Responsibilities & Reporting

<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>
----------------------------------	-----------------------	--	--	--------------------------	--------------------------

3B. Employee Reporting to PIC

<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>
----------------------------------	-----------------------	--	--	--------------------------	--------------------------

4. Proper Use of Restriction & Exclusion

<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>
----------------------------------	-----------------------	--	--	--------------------------	--------------------------

5. Clean-up of Vomiting and Diarrheal Events

<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>
----------------------------------	-----------------------	--	--	--------------------------	--------------------------

Good Hygienic Practices

6A. Proper eating, tasting, drinking, or tobacco use

<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>
----------------------------------	-----------------------	-----------------------	--	--------------------------	--------------------------

6B. Preventing contamination when tasting

<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>
----------------------------------	-----------------------	-----------------------	--	--------------------------	--------------------------

Inspector \_\_\_\_\_

Acknowledged Receipt : \_\_\_\_\_

Page 1 of 7

## Food Establishment Inspection Report - FDA

### Good Hygienic Practices

7. No discharge from eyes, nose, and mouth

IN	OUT	N/O	N/A	COS	REPEAT
<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>

### Control of Hands as a Vehicle of Contamination

8A. Hands clean & properly washed

IN	OUT	N/O	N/A	COS	REPEAT
<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>

8B. Where to wash, hand antiseptics

IN	OUT	N/O	N/A	COS	REPEAT
<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>

9. No bare hand contact with RTE food or a pre-approved alternative procedure properly allowed

IN	OUT	N/O	N/A	COS	REPEAT
<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

10A. Adequate handwashing sinks properly supplied and accessible

IN	OUT	N/O	N/A	COS	REPEAT
<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>

10B. Handwashing sinks accessible with proper signage, handwashing aids

IN	OUT	N/O	N/A	COS	REPEAT
<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>

### Approved Sources

11A. Milk, eggs, juice, bottled water, hermetically sealed food, game animals

IN	OUT	N/O	N/A	COS	REPEAT
<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

11B. Packaged foods, labeling, whole muscle beef

IN	OUT	N/O	N/A	COS	REPEAT
<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

11C. Obtaining raw fish, packaged meat & poultry, eggs

IN	OUT	N/O	N/A	COS	REPEAT
<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

12A. Food received at proper temperature

IN	OUT	N/O	N/A	COS	REPEAT
<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

12B. Shipping and receiving frozen food

IN	OUT	N/O	N/A	COS	REPEAT
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

13. Food in good condition, honestly presented, safe, & unadulterated

IN	OUT	N/O	N/A	COS	REPEAT
<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>

13B. Food package integrity

IN	OUT	N/O	N/A	COS	REPEAT
<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>

14A. Required records available: shellstock tags, parasite destruction

IN	OUT	N/O	N/A	COS	REPEAT
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

14B. Missing shellstock tags, destruction

IN	OUT	N/O	N/A	COS	REPEAT
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

14C. Parasite destruction- storing raw/partially cooked fish

IN	OUT	N/O	N/A	COS	REPEAT
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

### Protection from Contamination

15A. Food separated & protected

IN	OUT	N/O	N/A	COS	REPEAT
<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

15B. Cleaning equip/utensils/food containers

IN	OUT	N/O	N/A	COS	REPEAT
<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

16A. Food-contact surfaces: cleaned & sanitized immersion 171° F and above

IN	OUT	N/O	N/A	COS	REPEAT
<input type="radio"/>	<input checked="" type="radio"/>		<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

**This item has Notes. See Footnote 2 at end of questionnaire.**

Fail Notes 4-501.111

*\*Manual Warewashing - Hot Water Sanitization Temperatures  
[The temperature of the hot water used for sanitising is less than 171 degrees F. If the temperature during the hot water sanitising step is less than 171 degrees F then sanitisation will not be achieved. As a result, pathogenic organisms may survive and be subsequently transferred from utensils to food.]*

4-501.114 (A-E, F 1&2)

*Chemical Sanitization - Temperature, pH, Concentration and Hardness  
[The concentration of the sanitiser in the sink was zero. This means that the utensils are not being effectively sanitised as the sanitising solution is too weak.]*

16B. Food contact surfaces cleaned and sanitized NMT 194° F, NLT 180° F

IN	OUT	N/O	N/A	COS	REPEAT
<input type="radio"/>	<input type="radio"/>		<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

**This item has Notes. See Footnote 3 at end of questionnaire.**

Inspector

Acknowledged Receipt :

Page 2 of 7

## Food Establishment Inspection Report - FDA

### Protection from Contamination

16C. Mechanical warewashing equipment sanitization food contact surfaces, equip., utensils

IN	OUT	N/O	N/A	COS	REPEAT
<input type="radio"/>	<input type="radio"/>		<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

17. Proper disposition of returned, previously served reconditions, & unsafe food

<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>
----------------------------------	-----------------------	--	--	--------------------------	--------------------------

### Time/Temperature Control for Safety Food (TCS Food)

18A. Proper cooking time & temperatures

<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
-----------------------	-----------------------	-----------------------	----------------------------------	--------------------------	--------------------------

18B. Whole meat cooking and serving, storing

<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
-----------------------	-----------------------	-----------------------	----------------------------------	--------------------------	--------------------------

18C. Microwave cooking of raw animal foods

<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
-----------------------	-----------------------	-----------------------	----------------------------------	--------------------------	--------------------------

19. Proper reheating procedures for hot holding

<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
----------------------------------	-----------------------	-----------------------	-----------------------	--------------------------	--------------------------

20. Proper cooling time & temperatures

<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
-----------------------	-----------------------	-----------------------	----------------------------------	--------------------------	--------------------------

21. Proper hot holding temperatures

<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
----------------------------------	-----------------------	-----------------------	-----------------------	--------------------------	--------------------------

22. Proper cold holding temperatures

<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
-----------------------	----------------------------------	-----------------------	-----------------------	--------------------------	--------------------------

**This item has Notes. See Footnote 4 at end of questionnaire.**

Fail Notes: 3-501.16(A2 &B)

\*Cold PHFs Maintained at or Below 41oF- also pertains to untreated eggs (45F)  
[The temperature of the turkey sandwiches in the refrigerator was 43.2 degrees F. The temperature of cold PHF's should be maintained at or below 41 degrees F.]

23. Proper Date Marking

<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
-----------------------	-----------------------	-----------------------	----------------------------------	--------------------------	--------------------------

23B. TCS Foods Disposition

<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
-----------------------	-----------------------	-----------------------	----------------------------------	--------------------------	--------------------------

24A. Time as a public health control: procedures

<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
-----------------------	-----------------------	-----------------------	----------------------------------	--------------------------	--------------------------

24B. Time as a public health control: temperatures & discarding food

<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
-----------------------	-----------------------	-----------------------	----------------------------------	--------------------------	--------------------------

24C. Time as a public health control: highly susceptible population (HSP)

<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
-----------------------	-----------------------	-----------------------	----------------------------------	--------------------------	--------------------------

### Consumer Advisory

25. Consumer advisory provided for raw or undercooked foods

<input type="radio"/>	<input type="radio"/>		<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
-----------------------	-----------------------	--	----------------------------------	--------------------------	--------------------------

### Highly Susceptible Populations (HSP)

26A. Pasteurized foods used; prohibited foods not offered

<input checked="" type="radio"/>	<input type="radio"/>		<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
----------------------------------	-----------------------	--	-----------------------	--------------------------	--------------------------

26B. Reservice of foods

<input checked="" type="radio"/>	<input type="radio"/>		<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
----------------------------------	-----------------------	--	-----------------------	--------------------------	--------------------------

### Chemical

27. Food additives: approved and properly used

<input type="radio"/>	<input type="radio"/>		<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
-----------------------	-----------------------	--	----------------------------------	--------------------------	--------------------------

28A. Toxic substances identified, stored and used

<input checked="" type="radio"/>	<input type="radio"/>		<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
----------------------------------	-----------------------	--	-----------------------	--------------------------	--------------------------

28B. Poisonous materials, sanitizers, additives, medicines restriction, separation, storage

<input checked="" type="radio"/>	<input type="radio"/>		<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
----------------------------------	-----------------------	--	-----------------------	--------------------------	--------------------------

28C. Conditions of Use: law

<input checked="" type="radio"/>	<input type="radio"/>		<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
----------------------------------	-----------------------	--	-----------------------	--------------------------	--------------------------

### Conformance with Approved Procedures

29A. Compliance with variance, specialized process, & HACCP plan

<input type="radio"/>	<input type="radio"/>		<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
-----------------------	-----------------------	--	----------------------------------	--------------------------	--------------------------

Inspector

Acknowledged Receipt :

Page 3 of 7

## Food Establishment Inspection Report - FDA

### Conformance with Approved Procedures

29B. Treating juice- HACCP, reduced oxygen packaging w/out variance, conformance with approved procedures

IN OUT N/O N/A COS REPEAT  
☐ ☐ ☒ ☐ ☐

29C. When HACCP plan is required

☐ ☐ ☒ ☐ ☐

### GOOD RETAIL PRACTICES

Good Retail Practices are preventative measures to control the addition of pathogens, chemicals, and physical objects into foods.

IN = In compliance OUT = not in compliance COS - corrected on -site during inspection REPEAT = repeat violation

### Safe Food and Water

30. Pasteurized eggs used where required

IN OUT N/O N/A COS REPEAT  
☒ ☐ ☐ ☐ ☐ ☐

31A. Water & ice from approved source

☒ ☐ ☐ ☐ ☐ ☐

31B. Sampling, alternative water supply

☐ ☐ ☐ ☒ ☐ ☐

31C. Sampling report

☐ ☐ ☐ ☒ ☐ ☐

32. Variance obtained for specialized processing methods

☐ ☐ ☐ ☒ ☐ ☐

### Food Temperature Control

33A. Proper cooling methods used; adequate equipment for temperature control

☒ ☐ ☐ ☐ ☐ ☐

33B. Frozen food

☒ ☐ ☐ ☐ ☐ ☐

34. Plant food properly cooked for hot holding

☐ ☐ ☐ ☒ ☐ ☐

35. Approved thawing methods used

☐ ☐ ☐ ☒ ☐ ☐

36A. Thermometers provided and accurate

☒ ☐ ☐ ☐ ☐ ☐

***This item has Notes. See Footnote 5 at end of questionnaire.***

36B. Thermometers function properly

☒ ☐ ☐ ☐ ☐ ☐

### Food Identification

37A. Food properly labeled; original container

IN OUT COS REPEAT  
☐ ☒ ☐ ☐

**Fail Notes** 3-302.12 *Food Storage Containers Identified with Common Name of Food*  
*[The container of tomato ketchup was incorrectly labelled as mayonnaise. If food items are removed from their original container, the new container must be labelled correctly since some consumers may be allergic to certain foods.]*

37B. Food labels, labeling of ingredients

☒ ☐ ☐ ☐

### Prevention of Food Contamination

38A. Insects, rodents, & animals not present

☒ ☐ ☐ ☐

38B. Handling prohibition, controlling pests, prohibiting animals

☒ ☐ ☐ ☐

39A. Contamination prevented during food storage

☒ ☐ ☐ ☐

39B. Food display; ice used as an exterior coolant prohibited as an ingredient

☒ ☐ ☐ ☐

39C. Consumer self-service operations- utensils and monitoring

☒ ☐ ☐ ☐

40A. Personal cleanliness- prohibition jewelry

☒ ☐ ☐ ☐

Inspector \_\_\_\_\_

Acknowledged Receipt : \_\_\_\_\_

Page 4 of 7

## Food Establishment Inspection Report - FDA

Prevention of Food Contamination		IN	OUT	COS	REPEAT	
40B. Maintenance of fingernails		<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>	
41. Wiping cloths; properly used and stored		<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>	
42A. Washing Produce - following chemical manufacturers label		<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>	
42B. Washing produce		<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>	
42C. Washing produce- chemicals		<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Proper Use of Utensils		IN	OUT	COS	REPEAT	
43. In-use utensils; properly stored		<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>	
44. Utensils, equipment & linens; properly stored, dried, and handled		<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>	
45A. Single-use/ single service articles properly stored and used, required		<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>	
45B. Single-use/service articles use limitation, kitchenware and tableware preventing contamination		<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>	
46. Gloves used properly		<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Utensils, Equipment and Vending		IN	OUT	COS	REPEAT	
47A. Food & non-food contact surfaces cleanable		<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>	
47B. Food contact surfaces /utensils cleanability, molluscan shellfish tanks, consumer self-service		<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>	
47C. Properly designed characteristics: food and non-food contact surfaces, molluscan shellfish tanks		<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>	
48A. Warewashing facilities: installed, maintained, & used; test strips		<input type="radio"/>	<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>	
<b><i>This item has Notes. See Footnote 6 at end of questionnaire.</i></b>						
Fail Notes	<div style="border-left: 1px solid black; padding-left: 10px;"> 4-501.19 Manual warewashing equipment, wash solution temperature  [The wash solution temperature was below 110 degrees F which means that the performance of the detergent may be adversely affected. It is essential that the hot water temperature is maintained at a temperature of at least 110 degrees F.] </div>					
48B. Operational warewashing machines		<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>	
49. Non-food contact surfaces clean		<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Physical Facilities		IN	OUT	N/A	COS	REPEAT
50. Hot & cold water available; adequate pressure		<input checked="" type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>
51A. Plumbing installed; proper backflow devices		<input checked="" type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>
51B. Prohibiting a cross-connection, inspection and servicing system		<input checked="" type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>
51C. Approved system and cleanable fixtures, service sink		<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
52A. Sewage and waste water properly disposed		<input checked="" type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>
52B. Grease traps easily accessible for cleaning		<input checked="" type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>
52C. Removing mobile food establishment waste		<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
53A. Toilet facilities; properly constructed, supplied, & cleaned		<input checked="" type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>
53B. Toilet tissue availability		<input checked="" type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>

Inspector \_\_\_\_\_

Acknowledged Receipt : \_\_\_\_\_

Page 5 of 7

## Food Establishment Inspection Report - FDA

### Physical Facilities

	IN	OUT	N/A	COS	REPEAT
54. Garbage & refuse properly disposed; facilities maintained	<input checked="" type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>
55A. Physical facilities installed, maintained, & clean	<input checked="" type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>
55B. Private homes and living or sleeping quarters, use prohibition	<input checked="" type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>
56. Adequate ventilation & lighting; designated areas used	<input checked="" type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>

### MASSACHUSETTS ONLY REGULATIONS

Rules and Regulations adopted for use in Massachusetts only.

### Facilities

	IN	OUT	COS	REPEAT
57A. Catering	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
57B. When plans are reviewed, prerequisite for operations- valid permit	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
57C. Contents of plans and specifications, preoperational inspections	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
58. Mobile Food Operations	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
59. Temporary Food Establishments	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
60. Residential Kitchens	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

### Procedures

	IN	OUT	COS	REPEAT
61. Anti-choking Procedures	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
62. Tobacco Products: Notice and Sale	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
63. Food Allergy Awareness Requirements	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

Inspector \_\_\_\_\_

Acknowledged Receipt : \_\_\_\_\_

Page 6 of 7

## Food Establishment Inspection Report - FDA

### **Footnote 1**

**Notes:**

The PIC mentioned that she passed the serve safe examination last year but the certificate is not on site.

### **Footnote 2**

**Notes:**

There was a very strong smell from the sanitising solution causing myself and the PIC to cough. The PIC informed me that it has been like this for some time. I told the PIC that I would contact Rachel Oppenheimer who is in charge of the food service for Newton Public Schools.

### **Footnote 3**

**Notes:**

Kitchen does not have dishwasher.

### **Footnote 4**

**Notes:**

The PIC informed me that she usually has ice packs for salad (and other cold items) to sit on during service. There were no ice packs available at time of visit. In addition, there is no freezer in the kitchen.

### **Footnote 5**

**Notes:**

There is no ice machine in the kitchen so calibration not possible on site. Informed by PIC (Shimoya) that Sodexo requires that she sends the thermometers to them so they can be calibrated.

### **Footnote 6**

**Notes:**

The kitchen has a 2 bay sink but the PIC washes and rinses utensils in one sink and sanitises in the other sink. There is a procedure for this which has been displayed in the area. However, the temperature of the water is less than 110 degrees F.



City of Newton  
Health and Human Services  
Deborah Youngblood, PhD, Commissioner  
1000 Commonwealth Ave Newton, MA 02459  
(617) 796-1420



Public Health  
Prevent, Promote, Protect.

Food Establishment Inspection Report - FDA

Insp Date: 6/4/2018 Business ID: 1N2187

Business: Horace Mann School  
687 Watertown St.

Newton, MA 02460

Inspection: 4N000453

Section: 4

Phone: 559-9510

Inspector: 1N11124 Samantha Menard

Reason: 1-Routine

Results: No Follow-up

Inspection Summary

Official Order for Correction: Based on an inspection today, the items checked indicate violations of 105 CMR 590.000/ 2009 Federal Food Code. This report, when signed below by the Commissioner of Health / Agent constitutes an order by the Commissioner of Health. Failure to correct violations cited in this report may result in suspension or revocation of the food establishment permit and cessation of food establishment operations. If aggrieved by this order, you have the right to a hearing. The request must be in writing and submitted to the Commissioner of Health at the above address within 10 days of receipt of this order.

Est. Type 1 - Food Svc Establish License/Permit # \_\_\_\_\_ Risk Category 02 Risk Level Observed 02 Low

FOODBORNE ILLNESS RISK FACTORS AND PUBLIC HEALTH INTERVENTIONS

Compliance status: IN = in compliance OUT = not in compliance N/O = not observed N/A = not applicable

Marked in appropriate box for COS and/or R. COS = corrected on-site during inspection R = repeat violation

Risk factors are improper practices or procedures identified as the most prevalent contributing factors of foodborne illness or injury. Public Health Interventions are control measures to prevent foodborne illnesses or injury.

Supervision

1A. PIC Present

B. Cert. food manager, knowledge, no critical violations

C. Duties of PIC

IN OUT N/O N/A COS REPEAT

☒ ☐ ☐ ☐ ☐ ☐

☒ ☐ ☐ ☐ ☐ ☐

☒ ☐ ☐ ☐ ☐ ☐

Employee Health

2. Management, food employee and conditional employee; knowledge, responsibilities and reporting

3. Proper use of restriction and exclusion

IN OUT N/O N/A COS REPEAT

☒ ☐ ☐ ☐ ☐ ☐

☒ ☐ ☐ ☐ ☐ ☐

Good Hygienic Practices

4A. Proper eating, tasting, drinking, or tobacco use

B. Preventing contamination when tasting

5. No discharge from eyes, nose, and mouth

IN OUT N/O N/A COS REPEAT

☒ ☐ ☐ ☐ ☐ ☐

☒ ☐ ☐ ☐ ☐ ☐

☒ ☐ ☐ ☐ ☐ ☐

Inspector

Acknowledged Receipt : Shemoya

Page 1 of 4

## Food Establishment Inspection Report - FDA

### Preventing Contamination by Hands

6A. Hands clean & properly washed

IN OUT N/O N/A COS REPEAT  
☒ ☐ ☐ ☐ ☐

B. Where to wash, hand antiseptics

☒ ☐ ☐ ☐ ☐

7. No bare hand contact with RTE food or a pre-approved alternative procedure properly allowed

☒ ☐ ☐ ☐ ☐ ☐

8A. Adequate handwashing sinks properly supplied and accessible

☒ ☐ ☐ ☐

B. Handwashing sinks accessible with proper signage, handwashing aids

☒ ☐ ☐ ☐

C. Conveniently located handwashing sink

☒ ☐ ☐ ☐

### Approved Sources

9A. Milk, eggs, juice, bottled water, hermetically sealed food

IN OUT N/O N/A COS REPEAT  
☒ ☐ ☐ ☐

B. Fish and shellfish

☐ ☐ ☐ ☒ ☐ ☐

10. Food received at proper temperature

☐ ☐ ☒ ☐ ☐ ☐

11. Food in good condition, safe, & unadulterated

☒ ☐ ☐ ☐

### Protection from Contamination

12A. Food separated & protected

IN OUT N/O N/A COS REPEAT  
☒ ☐ ☐ ☐ ☐ ☐

B. Gloves, use limitation, one task- contaminated

☒ ☐ ☐ ☐ ☐ ☐

13A. Food-contact surfaces: cleaned & sanitized 171° F

☒ ☐ ☐ ☐ ☐ ☐

B. Food contact surfaces cleaned and sanitized NMT 194° F, NLT 180° F

☐ ☐ ☐ ☒ ☐ ☐

C. Mechanical warewashing equipment sanitization food contact surfaces, equip., utensils

☒ ☐ ☐ ☐ ☐

14. Proper disposition of returned, previously served reconditions, & unsafe food

☒ ☐ ☐ ☐

### Potentially Hazardous Food Time/Temperature

15. Proper cooking time & temperatures

IN OUT N/O N/A COS REPEAT  
☐ ☐ ☐ ☒ ☐ ☐

16. Proper reheating procedures for hot holding

☐ ☐ ☐ ☒ ☐ ☐

17. Proper cooling time & temperatures

☐ ☐ ☐ ☒ ☐ ☐

18. Proper hot holding temperatures

☒ ☐ ☐ ☐ ☐ ☐

19. Proper cold holding temperatures

☒ ☐ ☐ ☐ ☐ ☐

20. Time as a public health control: procedures & record

☐ ☐ ☐ ☒ ☐ ☐

### Highly Susceptible Populations

21. Pasteurized foods used; prohibited foods not offered

IN OUT N/O N/A COS REPEAT  
☒ ☐ ☐ ☐ ☐ ☐

### Chemical

22. Food additives: approved and properly used

IN OUT N/O N/A COS REPEAT  
☐ ☐ ☐ ☒ ☐ ☐

23A. Toxic substances properly identified, stored and used

☒ ☐ ☐ ☐ ☐ ☐

B. Restriction presence and use, restriction and storage of medicines

☒ ☐ ☐ ☐ ☐ ☐

*Shemoya*

Inspector

Acknowledged Receipt : Shemoya

Page 2 of 4

## Food Establishment Inspection Report - FDA

Chemical

IN OUT N/O N/A COS REPEAT

C. Storage- other personal care items

☒ ☐ ☐ ☐ ☐

### GOOD RETAIL PRACTICES

Good Retail Practices are preventative measures to control the addition of pathogens, chemicals, and physical objects into foods.

IN = In compliance OUT = not in compliance COS - corrected on -site during inspection REPEAT = repeat violation

#### Safe Food and Water

IN OUT N/O N/A COS REPEAT

24. Water & ice from approved source

☒ ☐ ☐ ☐ ☐ ☐

#### Food Temperature Control

IN OUT N/O N/A COS REPEAT

25A. Proper cooling methods used; adequate equipment for temperature control

☐ ☐ ☐ ☒ ☐ ☐

B. Frozen food

☐ ☐ ☐ ☒ ☐ ☐

26. Plant food properly cooked for hot holding

☐ ☐ ☐ ☒ ☐ ☐

27. Approved thawing methods used

☐ ☐ ☐ ☒ ☐ ☐

28A. Thermometers provided and accurate

☒ ☐ ☐ ☐ ☐ ☐

B. Thermometers function properly

☒ ☐ ☐ ☐ ☐ ☐

#### Food Identification

IN OUT COS REPEAT

29A. Food properly labeled; original container

☒ ☐ ☐ ☐

B. Food labels, labeling of ingredients

☒ ☐ ☐ ☐

#### Prevention of Food Contamination

IN OUT COS REPEAT

30A. Insects, rodents, & animals not present

☒ ☐ ☐ ☐

B. Handling prohibition, controlling pests, prohibiting animals

☒ ☐ ☐ ☐

31A. Contamination prevented during food storage

☒ ☐ ☐ ☐

B. Food display; ice used as an exterior coolant prohibited as an ingredient

☒ ☐ ☐ ☐

C. Consumer self-service operations- utensils and monitoring

☒ ☐ ☐ ☐

32A. Personal cleanliness- prohibition jewelry

☒ ☐ ☐ ☐

B. Maintenance of fingernails

☒ ☐ ☐ ☐

33. Wiping cloths; properly used and stored

☒ ☐ ☐ ☐

34. Washing fruits & vegetables

☒ ☐ ☐ ☐

#### Proper Use of Utensils

IN OUT COS REPEAT

35. In-use utensils; properly stored

☒ ☐ ☐ ☐

36. Utensils, equipment & linens; properly stored, dried, and handled

☒ ☐ ☐ ☐

37A. Single-use/ single service articles properly stored and used, required

☒ ☐ ☐ ☐

B. Single-use/service articles use limitation, kitchenware and tableware preventing contamination

☒ ☐ ☐ ☐

38. Gloves used properly

☒ ☐ ☐ ☐

*Sam Monette*

Inspector

Acknowledged Receipt : Shemoya

Page 3 of 4

## Food Establishment Inspection Report - FDA

### Utensils, Equipment and Vending

	IN	OUT	COS	REPEAT
39A. Food & non-food contact surfaces cleanable	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
B. Food contact surfaces /utensils cleanability, molluscan shellfish tanks, consumer self-servic	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
C. Properly designed characteristics: food and non-food contact surfaces, molluscan shellfish tanks	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
40A. Warewashing facilities: installed, maintained, & used; test strips	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
B. Operational warewashing machines	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
41. Non-food contact surfaces clean	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

### Physical Facilities

	IN	OUT	N/O	N/A	COS	REPEAT
42. Hot & cold water available; adequate pressure	<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>
43A. Plumbing installed; proper backflow devices	<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>
B. Prohibiting a cross-connection, non-drinking water, system maintained in good repair	<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>
C. Approved system and cleanable fixtures, service sink	<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>
44A. Sewage and waste water properly disposed	<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>
B. Grease traps easily accessible for cleaning	<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>
45A. Toilet facilities; properly constructed, supplied, & cleaned	<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>
B. Toilet tissue availability	<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>
46. Garbage & refuse properly disposed; facilities maintained	<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>
47A. Physical facilities installed, maintained, & clean	<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>
B. Cleaning maintenance tools, preventing contamination	<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>
48. Adequate ventilation & lighting; designated areas used	<input type="radio"/>	<input checked="" type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>

**Fail Notes** | 6-202.11 *Light Bulbs, Protective Shielding*  
*[Lightbulbs in prep area were not protected by shatter proof covers. Light bulbs must be shatter-resistant or shielded in areas exposed to food, clean equipment, utensils and linens.]*

### MASSACHUSETTS ONLY REGULATIONS

Rules and Regulations adopted for use in Massachusetts only.

#### Facilities

	IN	OUT	COS	REPEAT
49A. When plans are reviewed, prerequisite for operations- valid permit	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
B. Contents of plans and specifications, preoperational inspections	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

#### Procedures

	IN	OUT	COS	REPEAT
50. Anti-choking Procedures	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
51. Tobacco Products: Notice and Sale	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

*Sam Monardo*

Inspector

Acknowledged Receipt : Shernoya

Page 4 of 4



City of Newton  
Health and Human Services  
Deborah Youngblood, PhD, Commissioner  
1000 Commonwealth Ave Newton, MA 02459  
(617) 796-1420



Public Health  
Prevent, Promote, Protect

Food Establishment Inspection Report - FDA

Insp Date: 9/21/2018 Business ID: 1N2187

Business: Horace Mann School  
687 Watertown St.

Newton, MA 02460

Inspection: 6N000046

Section: 4

Phone: 559-9510

Inspector: 1N11123 Nicola Assan

Reason: 1-Routine

Results: No Follow-up R2

Inspection Summary

Official Order for Correction: Based on an inspection today, the items checked indicate violations of 105 CMR 590.000/ 2013 Federal Food Code. This report, when signed below by the Commissioner of Health / Agent constitutes an order by the Commissioner of Health. Failure to correct violations cited in this report may result in suspension or revocation of the food establishment permit and cessation of food establishment operations. If aggrieved by this order, you have the right to a hearing. The request must be in writing and submitted to the Commissioner of Health at the above address within 10 days of receipt of this order.

Est. Type 1 - Food Svc Establish License/Permit # \_\_\_\_\_ Risk Category 02 Risk Level Observed 02 Low

Foodborne Illness Complaint Investigated (All) ☐ Involving More Than Two Persons ☐

FOODBORNE ILLNESS RISK FACTORS AND PUBLIC HEALTH INTERVENTIONS

Compliance status: IN = in compliance OUT = not in compliance N/O = not observed N/A = not applicable

Marked in appropriate box for COS and/or R. COS = corrected on-site during inspection R = repeat violation

Risk factors are improper practices or procedures identified as the most prevalent contributing factors of foodborne illness or injury. Public Health Interventions are control measures to prevent foodborne illnesses or injury.

Supervision

1. PIC Present, Knowledge and Duties

IN	OUT	N/O	N/A	COS	REPEAT
<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>

2. Certified Food Protection Manager

<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>
----------------------------------	-----------------------	-----------------------	--	--------------------------	--------------------------

Employee Health / Responding to Contamination Events

3A. Employee Health: PIC Knowledge, Responsibilities & Reporting

<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>
----------------------------------	-----------------------	--	--	--------------------------	--------------------------

3B. Employee Reporting to PIC

<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>
----------------------------------	-----------------------	--	--	--------------------------	--------------------------

4. Proper Use of Restriction & Exclusion

<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>
----------------------------------	-----------------------	--	--	--------------------------	--------------------------

5. Clean-up of Vomiting and Diarrheal Events

<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>
----------------------------------	-----------------------	--	--	--------------------------	--------------------------

Good Hygienic Practices

6A. Proper eating, tasting, drinking, or tobacco use

<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>
----------------------------------	-----------------------	-----------------------	--	--------------------------	--------------------------

6B. Preventing contamination when tasting

<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>
----------------------------------	-----------------------	-----------------------	--	--------------------------	--------------------------

Inspector

Acknowledged Receipt : Tim Viveiros

Page 1 of 7

## Food Establishment Inspection Report - FDA

Good Hygienic Practices	IN	OUT	N/O	N/A	COS	REPEAT
-------------------------	----	-----	-----	-----	-----	--------

7. No discharge from eyes, nose, and mouth

⊙   ○   ○     □   □

Control of Hands as a Vehicle of Contamination	IN	OUT	N/O	N/A	COS	REPEAT
--	----	-----	-----	-----	-----	--------

8A. Hands clean & properly washed

⊙   ○   ○     □   □

8B. Where to wash, hand antiseptics

⊙   ○   ○     □   □

9. No bare hand contact with RTE food or a pre-approved alternative procedure properly allowed

⊙   ○   ○   ○   □   □

10A. Adequate handwashing sinks properly supplied and accessible

⊙   ○     □   □

10B. Handwashing sinks accesible with proper signage, handwashing aids

⊙   ○     □   □

Approved Sources	IN	OUT	N/O	N/A	COS	REPEAT
------------------	----	-----	-----	-----	-----	--------

11A. Milk, eggs, juice, bottled water, hermetically sealed food, game animals

⊙   ○   ○   ○   □   □

11B. Packaged foods, labeling, whole muscle beef

⊙   ○   ○   ○   □   □

11C. Obtaining raw fish, packaged meat & poultry, eggs

○   ○   ○   ⊙   □   □

12A. Food received at proper temperature

○   ○   ⊙   ○   □   □

12B. Shipping and receiving frozen food

○   ○   ○   ⊙   □   □

13. Food in good condition, honestly presented, safe, & unadulterated

⊙   ○     □   □

13B. Food package integrity

⊙   ○     □   □

14A. Required records available: shellstock tags, parasite destruction

○   ○   ○   ⊙   □   □

14B. Missing shellstock tags, destruction

○   ○   ○   ⊙   □   □

14C. Parasite destruction- storing raw/partially cooked fish

○   ○   ○   ⊙   □   □

Protection from Contamination	IN	OUT	N/O	N/A	COS	REPEAT
-------------------------------	----	-----	-----	-----	-----	--------

15A. Food separated & protected

⊙   ○   ○   ○   □   □

15B. Cleaning equip/utensils/food containers

⊙   ○   ○   ○   □   □

16A. Food-contact surfaces: cleaned & sanitized immersion 171° F and above

○   ⊙     ○   □   □

*Fail Notes*     4-501.114 (A-E, F 1&2)

*Chemical Sanitization - Temperature, pH, Concentration and Hardness  
[During the inspection, there was no sanitizer in the red bucket and the test strip measured 0ppm. You must ensure that the sanitizing solution is within the range of 150-400ppm as per manufacturer's instructions. Use the test strips supplied, on a regular basis to ensure the correct sanitization concentration.]*



Inspector

Acknowledged Receipt : Tim Viveiros

Page 2 of 7

## Food Establishment Inspection Report - FDA

### Protection from Contamination

IN OUT N/O N/A COS REPEAT

Fail Notes 4-703.11

*\*Methods of Sanitization - Hot Water and Chemical*

*[There is currently no plug in the sink that has been assigned to sanitize wares, utensils etc. This indicates that wares, utensils etc may not be effectively cleaned since cleaning is a 3 step process: Wash, Rinse then Sanitize. In addition, wares, utensils etc require a contact time of at least 60 seconds (as per manufacturer's label) for the sanitization process to be effective.]*

16B. Food contact surfaces cleaned and sanitized NMT 194° F, NLT 180° F

☐ ☐ ☐ ☐ ☐

16C. Mechanical warewashing equipment sanitization food contact surfaces, equip., utensils

☐ ☐ ☒ ☐ ☐

17. Proper disposition of returned, previously served reconditions, & unsafe food

☐ ☐ ☐ ☐ ☐

### Time/Temperature Control for Safety Food (TCS Food)

IN OUT N/O N/A COS REPEAT

18A. Proper cooking time & temperatures

☐ ☐ ☐ ☒ ☐ ☐

18B. Whole meat cooking and serving, storing

☐ ☐ ☐ ☒ ☐ ☐

18C. Microwave cooking of raw animal foods

☐ ☐ ☐ ☒ ☐ ☐

19. Proper reheating procedures for hot holding

☒ ☐ ☐ ☐ ☐ ☐

20. Proper cooling time & temperatures

☐ ☐ ☐ ☒ ☐ ☐

21. Proper hot holding temperatures

☒ ☐ ☐ ☐ ☐ ☐

22. Proper cold holding temperatures

☒ ☐ ☐ ☐ ☐ ☐

23. Proper Date Marking

☒ ☐ ☐ ☐ ☐ ☐

23B. TCS Foods Disposition

☒ ☐ ☐ ☐ ☐ ☐

24A. Time as a public health control: procedures

☐ ☐ ☐ ☒ ☐ ☐

24B. Time as a public health control: temperatures & discarding food

☐ ☐ ☐ ☒ ☐ ☐

24C. Time as a public health control: highly susceptible population (HSP)

☐ ☐ ☐ ☒ ☐ ☐

### Consumer Advisory

IN OUT N/O N/A COS REPEAT

25. Consumer advisory provided for raw or undercooked foods

☐ ☐ ☐ ☒ ☐ ☐

### Highly Susceptible Populations (HSP)

IN OUT N/O N/A COS REPEAT

26A. Pasteurized foods used; prohibited foods not offered

☐ ☐ ☐ ☒ ☐ ☐

26B. Reservice of foods

☐ ☐ ☐ ☒ ☐ ☐

### Chemical

IN OUT N/O N/A COS REPEAT

27. Food additives: approved and properly used

☐ ☐ ☐ ☒ ☐ ☐

28A. Toxic substances identified, stored and used

☒ ☐ ☐ ☐ ☐ ☐

28B. Poisonous materials, sanitizers, additives, medicines restriction, separation, storage

☒ ☐ ☐ ☐ ☐ ☐

28C. Conditions of Use: law

☒ ☐ ☐ ☐ ☐ ☐



Inspector

Acknowledged Receipt : Tim Viveiros

Page 3 of 7

## Food Establishment Inspection Report - FDA

### Conformance with Approved Procedures

	IN	OUT	N/O	N/A	COS	REPEAT
29A. Compliance with variance, specialized process, & HACCP plan	<input type="radio"/>	<input type="radio"/>		<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
29B. Treating juice- HACCP, reduced oxygen packaging w/out variance, conformance with approved procedures	<input type="radio"/>	<input type="radio"/>		<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
29C. When HACCP plan is required	<input type="radio"/>	<input type="radio"/>		<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

### GOOD RETAIL PRACTICES

Good Retail Practices are preventative measures to control the addition of pathogens, chemicals, and physical objects into foods.

IN = In compliance    OUT = not in compliance    COS - corrected on -site during inspection    REPEAT = repeat violation

### Safe Food and Water

	IN	OUT	N/O	N/A	COS	REPEAT
30. Pasteurized eggs used where required	<input type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>
31A. Water & ice from approved source	<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>
31B. Sampling, alternative water supply	<input type="radio"/>	<input type="radio"/>		<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
31C. Sampling report	<input type="radio"/>	<input type="radio"/>		<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
32. Variance obtained for specialized processing methods	<input type="radio"/>	<input type="radio"/>		<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

### Food Temperature Control

	IN	OUT	N/O	N/A	COS	REPEAT
33A. Proper cooling methods used; adequate equipment for temperature control	<input type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>
33B. Frozen food	<input type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>
34. Plant food properly cooked for hot holding	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
35. Approved thawing methods used	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
36A. Thermometers provided and accurate	<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>
36B. Thermometers function properly	<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>

### Food Identification

	IN	OUT	COS	REPEAT
37A. Food properly labeled; original container		<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
37B. Food labels, labeling of ingredients		<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

### Prevention of Food Contamination

	IN	OUT	COS	REPEAT
38A. Insects, rodents, & animals not present		<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
38B. Handling prohibition, controlling pests, prohibiting animals		<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
39A. Contamination prevented during food storage		<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
39B. Food display; ice used as an exterior coolant prohibited as an ingredient		<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
39C. Consumer self-service operations- utensils and monitoring	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
40A. Personal cleanliness- prohibition jewelry		<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
40B. Maintenance of fingernails		<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
41. Wiping cloths; properly used and stored		<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
42A. Washing Produce - following chemical manufacturers label	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>



Inspector

Acknowledged Receipt : Tim Viveiros

Page 4 of 7

## Food Establishment Inspection Report - FDA

### Prevention of Food Contamination

42B. Washing produce

IN OUT COS REPEAT  
☒ ☐ ☐ ☐

42C. Washing produce- chemicals

☐ ☐ ☐ ☐

### Proper Use of Utensils

43. In-use utensils; properly stored

☒ ☐ ☐ ☐

44. Utensils, equipment & linens; properly stored, dried, and handled

☒ ☐ ☐ ☐

45A. Single-use/ single service articles properly stored and used, required

☒ ☐ ☐ ☐

45B. Single-use/service articles use limitation, kitchenware and tableware preventing contamination

☒ ☐ ☐ ☐

46. Gloves used properly

☒ ☐ ☐ ☐

### Utensils, Equipment and Vending

47A. Food & non-food contact surfaces cleanable

☒ ☐ ☐ ☐

47B. Food contact surfaces /utensils cleanability, molluscan shellfish tanks, consumer self-service

☒ ☐ ☐ ☐

47C. Properly designed characteristics: food and non-food contact surfaces, molluscan shellfish tanks

☒ ☐ ☐ ☐

48A. Warewashing facilities: installed, maintained, & used; test strips

☒ ☐ ☐ ☐

48B. Operational warewashing machines

☐ ☐ ☐ ☐

49. Non-food contact surfaces clean

☒ ☐ ☐ ☐

### Physical Facilities

50. Hot & cold water available; adequate pressure

IN OUT N/A COS REPEAT  
☒ ☐ ☐ ☐

51A. Plumbing installed; proper backflow devices

☒ ☐ ☐ ☐

51B. Prohibiting a cross-connection, inspection and servicing system

☒ ☐ ☐ ☐

51C. Approved system and cleanable fixtures, service sink

☒ ☐ ☐ ☐ ☐

52A. Sewage and waste water properly disposed

☒ ☐ ☐ ☐

52B. Grease traps easily accessible for cleaning

☒ ☐ ☐ ☐

52C. Removing mobile food establishment waste

☐ ☐ ☒ ☐ ☐

53A. Toilet facilities; properly constructed, supplied, & cleaned

☒ ☐ ☐ ☐

53B. Toilet tissue availability

☒ ☐ ☐ ☐

54. Garbage & refuse properly disposed; facilities maintained

☒ ☐ ☐ ☐

55A. Physical facilities installed, maintained, & clean

☒ ☐ ☐ ☐

55B. Private homes and living or sleeping quarters, use prohibition

☒ ☐ ☐ ☐

56. Adequate ventilation & lighting; designated areas used

☐ ☐ ☐ ☐

***This item has Notes. See Footnote 1 at end of questionnaire.***

### MASSACHUSETTS ONLY REGULATIONS

Rules and Regulations adopted for use in Massachusetts only.



Inspector

Acknowledged Receipt : Tim Viveiros

Page 5 of 7

## Food Establishment Inspection Report - FDA

### Facilities

57A. Catering

IN	OUT	COS	REPEAT
<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

57B. When plans are reviewed, prerequisite for operations- valid permit

<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
-----------------------	-----------------------	--------------------------	--------------------------

57C. Contents of plans and specifications, preoperational inspections

<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
-----------------------	-----------------------	--------------------------	--------------------------

58. Mobile Food Operations

<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
-----------------------	-----------------------	--------------------------	--------------------------

59. Temporary Food Establishments

<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
-----------------------	-----------------------	--------------------------	--------------------------

60. Residential Kitchens

<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
-----------------------	-----------------------	--------------------------	--------------------------

### Procedures

61. Anti-choking Procedures

<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
-----------------------	-----------------------	--------------------------	--------------------------

62. Tobacco Products: Notice and Sale

<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
-----------------------	-----------------------	--------------------------	--------------------------

63. Food Allergy Awareness Requirements

<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
-----------------------	-----------------------	--------------------------	--------------------------



Inspector

Acknowledged Receipt : Tim Viveiros

Page 6 of 7

## Food Establishment Inspection Report - FDA

### **Footnote 1**

#### **Notes:**

The previous inspection on 4th June 2018 highlighted the need for the light bulbs to be protected by shatterproof covers or lightbulbs be shatter resistant. The PIC informed me that the person responsible for school maintenance told her that the lightbulbs comply with the regulations. This issue had not been identified on previous inspections.

Will call the general manager (Sodexo) of Newton Public Schools.



Inspector

Acknowledged Receipt : Tim Viveiros

Page 7 of 7



City of Newton  
Health and Human Services  
Deborah Youngblood, PhD, Commissioner  
1000 Commonwealth Ave Newton, MA 02459  
(617) 796-1420



Public Health  
Prevent. Promote. Protect.

Food Establishment Inspection Report - FDA

Insp Date: 5/23/2019 Business ID: 1N2187

Business: Horace Mann School  
687 Watertown St.

Newton, MA 02460

Inspection: 6N000123

Section: 4

Phone: 559-9510

Inspector: 1N11123 Nicola Assan

Reason: 1-Routine

Results: No Follow-up R2

Inspection Summary

Official Order for Correction: Based on an inspection today, the items checked indicate violations of 105 CMR 590.000/ 2013 Federal Food Code. This report, when signed below by the Commissioner of Health / Agent constitutes an order by the Commissioner of Health. Failure to correct violations cited in this report may result in suspension or revocation of the food establishment permit and cessation of food establishment operations. If aggrieved by this order, you have the right to a hearing. The request must be in writing and submitted to the Commissioner of Health at the above address within 10 days of receipt of this order.

Est. Type 1 - Food Svc Establis License/Permit # \_\_\_\_\_ Risk Category 02 Risk Level Observed 02 Low

Foodborne Illness Complaint Investigated (All) ☐ Involving More Than Two Persons ☐

FOODBORNE ILLNESS RISK FACTORS AND PUBLIC HEALTH INTERVENTIONS

Compliance status: IN = in compliance OUT = not in compliance N/O = not observed N/A = not applicable

Marked in appropriate box for COS and/or R. COS = corrected on-site during inspection R = repeat violation

Risk factors are improper practices or procedures identified as the most prevalent contributing factors of foodborne illness or injury. Public Health Interventions are control measures to prevent foodborne illnesses or injury.

Supervision

1. PIC Present, Knowledge and Duties

IN	OUT	N/O	N/A	COS	REPEAT
<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>

2. Certified Food Protection Manager

<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>
----------------------------------	-----------------------	-----------------------	--	--------------------------	--------------------------

Employee Health / Responding to Contamination Events

3A. Employee Health: PIC Knowledge, Responsibilities & Reporting

<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>
----------------------------------	-----------------------	--	--	--------------------------	--------------------------

3B. Employee Reporting to PIC

<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>
----------------------------------	-----------------------	--	--	--------------------------	--------------------------

4. Proper Use of Restriction & Exclusion

<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>
----------------------------------	-----------------------	--	--	--------------------------	--------------------------

5. Clean-up of Vomiting and Diarrheal Events

<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>
----------------------------------	-----------------------	--	--	--------------------------	--------------------------

Good Hygienic Practices

6A. Proper eating, tasting, drinking, or tobacco use

<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>
----------------------------------	-----------------------	-----------------------	--	--------------------------	--------------------------

6B. Preventing contamination when tasting

<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>
----------------------------------	-----------------------	-----------------------	--	--------------------------	--------------------------

*Assan*

Inspector

Acknowledged Receipt : Tim Viveiros

Page 1 of 6

## Food Establishment Inspection Report - FDA

### Good Hygienic Practices

7. No discharge from eyes, nose, and mouth

IN	OUT	N/O	N/A	COS	REPEAT
<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>

### Control of Hands as a Vehicle of Contamination

8A. Hands clean & properly washed

<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>
----------------------------------	-----------------------	-----------------------	--	--------------------------	--------------------------

8B. Where to wash, hand antiseptics

<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>
----------------------------------	-----------------------	-----------------------	--	--------------------------	--------------------------

9. No bare hand contact with RTE food or a pre-approved alternative procedure properly allowed

<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
----------------------------------	-----------------------	-----------------------	-----------------------	--------------------------	--------------------------

10A. Adequate handwashing sinks properly supplied and accessible

<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>
----------------------------------	-----------------------	--	--	--------------------------	--------------------------

10B. Handwashing sinks accesible with proper signage, handwashing aids

<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>
----------------------------------	-----------------------	--	--	--------------------------	--------------------------

### Approved Sources

11A. Milk, eggs, juice, bottled water, hermetically sealed food, game animals

<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
----------------------------------	-----------------------	-----------------------	-----------------------	--------------------------	--------------------------

11B. Packaged foods, labeling, whole muscle beef

<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
-----------------------	-----------------------	-----------------------	----------------------------------	--------------------------	--------------------------

11C. Obtaining raw fish, packaged meat & poultry, eggs

<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
-----------------------	-----------------------	-----------------------	----------------------------------	--------------------------	--------------------------

12A. Food received at proper temperature

<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
-----------------------	-----------------------	----------------------------------	-----------------------	--------------------------	--------------------------

12B. Shipping and receiving frozen food

<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
-----------------------	-----------------------	----------------------------------	-----------------------	--------------------------	--------------------------

13. Food in good condition, honestly presented, safe, & unadulterated

<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>
----------------------------------	-----------------------	--	--	--------------------------	--------------------------

13B. Food package integrity

<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>
----------------------------------	-----------------------	--	--	--------------------------	--------------------------

14A. Required records available: shellstock tags, parasite destruction

<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
-----------------------	-----------------------	-----------------------	----------------------------------	--------------------------	--------------------------

14B. Missing shellstock tags, destruction

<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
-----------------------	-----------------------	-----------------------	----------------------------------	--------------------------	--------------------------

14C. Parasite destruction- storing raw/partially cooked fish

<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
-----------------------	-----------------------	-----------------------	----------------------------------	--------------------------	--------------------------

### Protection from Contamination

15A. Food separated & protected

<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
----------------------------------	-----------------------	-----------------------	-----------------------	--------------------------	--------------------------

15B. Cleaning equip/utensils/food containers

<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
----------------------------------	-----------------------	-----------------------	-----------------------	--------------------------	--------------------------

16A. Food-contact surfaces: cleaned & sanitized immersion 171° F and above

<input checked="" type="radio"/>	<input type="radio"/>		<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
----------------------------------	-----------------------	--	-----------------------	--------------------------	--------------------------

16B. Food contact surfaces cleaned and sanitized NMT 194° F, NLT 180° F

<input checked="" type="radio"/>	<input type="radio"/>		<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
----------------------------------	-----------------------	--	-----------------------	--------------------------	--------------------------

16C. Mechanical warewashing equipment sanitization food contact surfaces, equip., utensils

<input checked="" type="radio"/>	<input type="radio"/>		<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
----------------------------------	-----------------------	--	-----------------------	--------------------------	--------------------------

17. Proper disposition of returned, previously served reconditions, & unsafe food

<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>
----------------------------------	-----------------------	--	--	--------------------------	--------------------------

### Time/Temperature Control for Safety Food (TCS Food)

18A. Proper cooking time & temperatures

<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
-----------------------	-----------------------	----------------------------------	-----------------------	--------------------------	--------------------------

18B. Whole meat cooking and serving, storing

<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
-----------------------	-----------------------	-----------------------	----------------------------------	--------------------------	--------------------------

18C. Microwave cooking of raw animal foods

<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
-----------------------	-----------------------	-----------------------	----------------------------------	--------------------------	--------------------------

19. Proper reheating procedures for hot holding

<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
-----------------------	-----------------------	----------------------------------	-----------------------	--------------------------	--------------------------

20. Proper cooling time & temperatures

<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
-----------------------	-----------------------	----------------------------------	-----------------------	--------------------------	--------------------------

21. Proper hot holding temperatures

<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
-----------------------	-----------------------	----------------------------------	-----------------------	--------------------------	--------------------------

*Mason*

Inspector

Acknowledged Receipt : Tim Viveiros

Page 2 of 6

## Food Establishment Inspection Report - FDA

### Time/Temperature Control for Safety Food (TCS Food)

22. Proper cold holding temperatures

IN OUT N/O N/A COS REPEAT  
☒ ☐ ☐ ☐ ☐ ☐

*This item has Notes. See Footnote 1 at end of questionnaire.*

23. Proper Date Marking

☒ ☐ ☐ ☐ ☐ ☐

23B. TCS Foods Disposition

☒ ☐ ☐ ☐ ☐ ☐

24A. Time as a public health control: procedures

☐ ☐ ☐ ☒ ☐ ☐

24B. Time as a public health control: temperatures & discarding food

☐ ☐ ☐ ☒ ☐ ☐

24C. Time as a public health control: highly susceptible population (HSP)

☐ ☐ ☐ ☒ ☐ ☐

### Consumer Advisory

25. Consumer advisory provided for raw or undercooked foods

IN OUT N/O N/A COS REPEAT  
☐ ☐ ☐ ☒ ☐ ☐

### Highly Susceptible Populations (HSP)

26A. Pasteurized foods used; prohibited foods not offered

IN OUT N/O N/A COS REPEAT  
☐ ☐ ☐ ☒ ☐ ☐

26B. Reservice of foods

☐ ☐ ☐ ☒ ☐ ☐

### Chemical

27. Food additives: approved and properly used

IN OUT N/O N/A COS REPEAT  
☐ ☐ ☐ ☒ ☐ ☐

28A. Toxic substances identified, stored and used

☒ ☐ ☐ ☐ ☐ ☐

28B. Poisonous materials, sanitizers, additives, medicines restriction, separation, storage

☒ ☐ ☐ ☐ ☐ ☐

28C. Conditions of Use: law

☒ ☐ ☐ ☐ ☐ ☐

### Conformance with Approved Procedures

29A. Compliance with variance, specialized process, & HACCP plan

IN OUT N/O N/A COS REPEAT  
☐ ☐ ☐ ☒ ☐ ☐

29B. Treating juice- HACCP, reduced oxygen packaging w/out variance, conformance with approved procedures

☐ ☐ ☐ ☒ ☐ ☐

29C. When HACCP plan is required

☐ ☐ ☐ ☒ ☐ ☐

### GOOD RETAIL PRACTICES

Good Retail Practices are preventative measures to control the addition of pathogens, chemicals, and physical objects into foods.

IN = In compliance OUT = not in compliance COS - corrected on -site during inspection REPEAT = repeat violation

### Safe Food and Water

30. Pasteurized eggs used where required

IN OUT N/O N/A COS REPEAT  
☐ ☐ ☐ ☐ ☐ ☐

31A. Water & ice from approved source

☒ ☐ ☐ ☐ ☐ ☐

31B. Sampling, alternative water supply

☐ ☐ ☐ ☒ ☐ ☐

31C. Sampling report

☐ ☐ ☐ ☒ ☐ ☐

32. Variance obtained for specialized processing methods

☐ ☐ ☐ ☒ ☐ ☐

### Food Temperature Control

33A. Proper cooling methods used; adequate equipment for temperature control

IN OUT N/O N/A COS REPEAT  
☐ ☐ ☐ ☐ ☐ ☐

*M. Assar*

Inspector

Acknowledged Receipt : Tim Viveiros

Page 3 of 6

## Food Establishment Inspection Report - FDA

Food Temperature Control	IN	OUT	N/O	N/A	COS	REPEAT
33B. Frozen food	<input type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>
34. Plant food properly cooked for hot holding	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
35. Approved thawing methods used	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
36A. Thermometers provided and accurate	<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>
36B. Thermometers function properly	<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>

Food Identification	IN	OUT	COS	REPEAT
37A. Food properly labeled; original container		<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>
37B. Food labels, labeling of ingredients		<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>

Prevention of Food Contamination	IN	OUT	COS	REPEAT
38A. Insects, rodents, & animals not present		<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>
38B. Handling prohibition, controlling pests, prohibiting animals		<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>
39A. Contamination prevented during food storage		<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>
39B. Food display; ice used as an exterior coolant prohibited as an ingredient		<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>
39C. Consumer self-service operations- utensils and monitoring		<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>
40A. Personal cleanliness- prohibition jewelry		<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>
40B. Maintenance of fingernails		<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>
41. Wiping cloths; properly used and stored		<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>
42A. Washing Produce - following chemical manufacturers label		<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>
42B. Washing produce		<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>
42C. Washing produce- chemicals		<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>

Proper Use of Utensils	IN	OUT	COS	REPEAT
43. In-use utensils; properly stored		<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>
44. Utensils, equipment & linens; properly stored, dried, and handled		<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>
45A. Single-use/ single service articles properly stored and used, required		<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>
45B. Single-use/service articles use limitation, kitchenware and tableware preventing contamination		<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>
46. Gloves used properly		<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>

Utensils, Equipment and Vending	IN	OUT	COS	REPEAT
47A. Food & non-food contact surfaces cleanable		<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>
47B. Food contact surfaces /utensils cleanability, molluscan shellfish tanks, consumer self-service		<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>
47C. Properly designed characteristics: food and non-food contact surfaces, molluscan shellfish tanks		<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>
48A. Warewashing facilities: installed, maintained, & used; test strips		<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>
48B. Operational warewashing machines		<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>

*Mason*

Inspector

Acknowledged Receipt : Tim Viveiros

Page 4 of 6

## Food Establishment Inspection Report - FDA

### Utensils, Equipment and Vending

49. Non-food contact surfaces clean

IN	OUT	COS	REPEAT
<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

### Physical Facilities

50. Hot & cold water available; adequate pressure

IN	OUT	N/A	COS	REPEAT
<input checked="" type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>

***This item has Notes. See Footnote 2 at end of questionnaire.***

51A. Plumbing installed; proper backflow devices

IN	OUT	N/A	COS	REPEAT
<input checked="" type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>

51B. Prohibiting a cross-connection, inspection and servicing system

IN	OUT	N/A	COS	REPEAT
<input checked="" type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>

51C. Approved system and cleanable fixtures, service sink

IN	OUT	N/A	COS	REPEAT
<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

52A. Sewage and waste water properly disposed

IN	OUT	N/A	COS	REPEAT
<input checked="" type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>

52B. Grease traps easily accessible for cleaning

IN	OUT	N/A	COS	REPEAT
<input checked="" type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>

52C. Removing mobile food establishment waste

IN	OUT	N/A	COS	REPEAT
<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

53A. Toilet facilities; properly constructed, supplied, & cleaned

IN	OUT	N/A	COS	REPEAT
<input checked="" type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>

53B. Toilet tissue availability

IN	OUT	N/A	COS	REPEAT
<input checked="" type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>

54. Garbage & refuse properly disposed; facilities maintained

IN	OUT	N/A	COS	REPEAT
<input checked="" type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>

55A. Physical facilities installed, maintained, & clean

IN	OUT	N/A	COS	REPEAT
<input checked="" type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>

55B. Private homes and living or sleeping quarters, use prohibition

IN	OUT	N/A	COS	REPEAT
<input checked="" type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>

56. Adequate ventilation & lighting; designated areas used

IN	OUT	N/A	COS	REPEAT
<input checked="" type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>

### MASSACHUSETTS ONLY REGULATIONS

Rules and Regulations adopted for use in Massachusetts only.

#### Facilities

57A. Catering

IN	OUT	COS	REPEAT
<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

57B. When plans are reviewed, prerequisite for operations- valid permit

IN	OUT	COS	REPEAT
<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

57C. Contents of plans and specifications, preoperational inspections

IN	OUT	COS	REPEAT
<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

58. Mobile Food Operations

IN	OUT	COS	REPEAT
<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

59. Temporary Food Establishments

IN	OUT	COS	REPEAT
<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

60. Residential Kitchens

IN	OUT	COS	REPEAT
<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

#### Procedures

61. Anti-choking Procedures

IN	OUT	COS	REPEAT
<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

62. Tobacco Products: Notice and Sale

IN	OUT	COS	REPEAT
<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

63. Food Allergy Awareness Requirements

IN	OUT	COS	REPEAT
<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

*Masson*

Inspector

Acknowledged Receipt : Tim Viveiros

Page 5 of 6

## Food Establishment Inspection Report - FDA

### **Footnote 1**

**Notes:**

The PIC was removing the cold TCS (time/temperature control for safety) foods (sandwiches and salad) from the refrigerator more than an hour and a half before lunch service. Please refrain from this practice as it will cause the temperature of such food to increase and thus cause the possible growth of food poisoning organisms. The temperature of cold TCS foods should be maintained at a temperature of 41 degrees F or below.

In addition, the food in the refrigerator must be kept in an organized manner.

### **Footnote 2**

**Notes:**

The PIC only had access to one sink in the kitchen since the water had been shut off to the 3 bay sink compartment, due to lead in the water.



Inspector

Acknowledged Receipt : Tim Viveiros

Page 6 of 6



City of Newton  
Health and Human Services  
Deborah Youngblood, PhD, Commissioner  
1000 Commonwealth Ave Newton, MA 02459  
(617) 796-1420



Public Health  
Prevent. Promote. Protect.

Food Establishment Inspection Report - FDA

Insp Date: 12/7/2016 Business ID: 1N2231

Business: Lincoln Elliot School  
191 Pearl St.

Newton, MA 02458

Inspection: 5N000262

Section: 1

Phone: 559-9540

Inspector: 1N81219 Kyle Simpson

Reason: 1-Routine

Results: No Follow-up

Inspection Summary

Official Order for Correction: Based on an inspection today, the items checked indicate violations of 105 CMR 590.000/ 2009 Federal Food Code. This report, when signed below by the Commissioner of Health / Agent constitutes an order by the Commissioner of Health. Failure to correct violations cited in this report may result in suspension or revocation of the food establishment permit and cessation of food establishment operations. If aggrieved by this order, you have the right to a hearing. The request must be in writing and submitted to the Commissioner of Health at the above address within 10 days of receipt of this order.

Est. Type 1 - Food Svc Establis License/Permit # \_\_\_\_\_ Risk Category 02 Risk Level Observed 02 Low

FOODBORNE ILLNESS RISK FACTORS AND PUBLIC HEALTH INTERVENTIONS

Compliance status: IN = in compliance OUT = not in compliance N/O = not observed N/A = not applicable

Marked in appropriate box for COS and/or R. COS = corrected on-site during inspection R = repeat violation

Risk factors are improper practices or procedures identified as the most prevalent contributing factors of foodborne illness or injury. Public Health Interventions are control measures to prevent foodborne illnesses or injury.

Supervision

1A. PIC Present

IN OUT N/O N/A COS REPEAT

☒ ☐ ☐ ☐ ☐ ☐

B. Cert. food manager, knowledge, no critical violations

☒ ☐ ☐ ☐ ☐ ☐

C. Duties of PIC

☒ ☐ ☐ ☐ ☐ ☐

Employee Health

2. Management, food employee and conditional employee; knowledge, responsibilities and reporting

IN OUT N/O N/A COS REPEAT

☒ ☐ ☐ ☐ ☐ ☐

3. Proper use of restriction and exclusion

☒ ☐ ☐ ☐ ☐ ☐

Good Hygienic Practices

4A. Proper eating, tasting, drinking, or tobacco use

IN OUT N/O N/A COS REPEAT

☒ ☐ ☐ ☐ ☐ ☐

B. Preventing contamination when tasting

☐ ☐ ☒ ☐ ☐ ☐

5. No discharge from eyes, nose, and mouth

☒ ☐ ☐ ☐ ☐ ☐

*[Signature]*  
Inspector

Acknowledged Receipt : Angela Bianchi

Page 1 of 4

## Food Establishment Inspection Report - FDA

### Preventing Contamination by Hands

6A. Hands clean & properly washed

IN OUT N/O N/A COS REPEAT

☐ ☐ ☐ ☐ ☐

B. Where to wash, hand antiseptics

☐ ☐ ☐ ☐ ☐

7. No bare hand contact with RTE food or a pre-approved alternative procedure properly allowed

☐ ☐ ☐ ☐ ☐ ☐

8A. Adequate handwashing sinks properly supplied and accessible

☐ ☐ ☐ ☐

B. Handwashing sinks accessible with proper signage, handwashing aids

☐ ☐ ☐ ☐

C. Conveniently located handwashing sink

☐ ☐ ☐ ☐

### Approved Sources

9A. Milk, eggs, juice, bottled water, hermetically sealed food

IN OUT N/O N/A COS REPEAT

☒ ☐ ☐ ☐

B. Fish and shellfish

☐ ☐ ☐ ☒ ☐ ☐

10. Food received at proper temperature

☐ ☐ ☒ ☐ ☐ ☐

11. Food in good condition, safe, & unadulterated

☒ ☐ ☐ ☐

### Protection from Contamination

12A. Food separated & protected

IN OUT N/O N/A COS REPEAT

☒ ☐ ☐ ☐ ☐ ☐

B. Gloves, use limitation, one task- contaminated

☒ ☐ ☐ ☐ ☐ ☐

13A. Food-contact surfaces: cleaned & sanitized 171° F

☒ ☐ ☐ ☐ ☐

B. Food contact surfaces cleaned and sanitized NMT 194° F, NLT 180° F

☒ ☐ ☐ ☐ ☐

C. Mechanical warewashing equipment sanitization food contact surfaces, equip., utensils

☒ ☐ ☐ ☐ ☐

14. Proper disposition of returned, previously served reconditions, & unsafe food

☒ ☐ ☐ ☐

### Potentially Hazardous Food Time/Temperature

15. Proper cooking time & temperatures

IN OUT N/O N/A COS REPEAT

☐ ☐ ☐ ☒ ☐ ☐

16. Proper reheating procedures for hot holding

☐ ☐ ☒ ☐ ☐ ☐

17. Proper cooling time & temperatures

☐ ☐ ☒ ☐ ☐ ☐

18. Proper hot holding temperatures

☐ ☐ ☒ ☐ ☐ ☐

19. Proper cold holding temperatures

☒ ☐ ☐ ☐ ☐ ☐

20. Time as a public health control: procedures & record

☐ ☐ ☐ ☒ ☐ ☐

### Highly Susceptible Populations

21. Pasteurized foods used; prohibited foods not offered

IN OUT N/O N/A COS REPEAT

☐ ☐ ☐ ☒ ☐ ☐

### Chemical

22. Food additives: approved and properly used

IN OUT N/O N/A COS REPEAT

☐ ☐ ☐ ☒ ☐ ☐

23A. Toxic substances properly identified, stored and used

☒ ☐ ☐ ☐ ☐

B. Restriction presence and use, restriction and storage of medicines

☒ ☐ ☐ ☐ ☐

*Angela Bianchi*  
Inspector

Acknowledged Receipt : Angela Bianchi

Page 2 of 4

## Food Establishment Inspection Report - FDA

Chemical

IN OUT N/O N/A COS REPEAT

C. Storage- other personal care items

☒ ☐ ☐ ☐ ☐

### GOOD RETAIL PRACTICES

Good Retail Practices are preventative measures to control the addition of pathogens, chemicals, and physical objects into foods.

IN = In compliance OUT = not in compliance COS - corrected on -site during inspection REPEAT = repeat violation

#### Safe Food and Water

IN OUT N/O N/A COS REPEAT

24. Water & ice from approved source

☒ ☐ ☐ ☐ ☐ ☐

#### Food Temperature Control

IN OUT N/O N/A COS REPEAT

25A. Proper cooling methods used; adequate equipment for temperature control

☒ ☐ ☐ ☐ ☐ ☐

B. Frozen food

☒ ☐ ☐ ☐ ☐ ☐

26. Plant food properly cooked for hot holding

☐ ☐ ☐ ☒ ☐ ☐

27. Approved thawing methods used

☒ ☐ ☐ ☐ ☐ ☐

28A. Thermometers provided and accurate

☒ ☐ ☐ ☐ ☐ ☐

B. Thermometers function properly

☒ ☐ ☐ ☐ ☐ ☐

#### Food Identification

IN OUT COS REPEAT

29A. Food properly labeled; original container

☒ ☐ ☐ ☐

B. Food labels, labeling of ingredients

☒ ☐ ☐ ☐

#### Prevention of Food Contamination

IN OUT COS REPEAT

30A. Insects, rodents, & animals not present

☒ ☐ ☐ ☐

B. Handling prohibition, controlling pests, prohibiting animals

☒ ☐ ☐ ☐

31A. Contamination prevented during food storage

☒ ☐ ☐ ☐

B. Food display; ice used as an exterior coolant prohibited as an ingredient

☒ ☐ ☐ ☐

C. Consumer self-service operations- utensils and monitoring

☒ ☐ ☐ ☐

32A. Personal cleanliness- prohibition jewelry

☒ ☐ ☐ ☐

B. Maintenance of fingernails

☒ ☐ ☐ ☐

33. Wiping cloths; properly used and stored

☒ ☐ ☐ ☐

34. Washing fruits & vegetables

☒ ☐ ☐ ☐

#### Proper Use of Utensils

IN OUT COS REPEAT

35. In-use utensils; properly stored

☒ ☐ ☐ ☐

36. Utensils, equipment & linens; properly stored, dried, and handled

☒ ☐ ☐ ☐

37A. Single-use/ single service articles properly stored and used, required

☒ ☐ ☐ ☐

B. Single-use/service articles use limitation, kitchenware and tableware preventing contamination

☒ ☐ ☐ ☐

38. Gloves used properly

☒ ☐ ☐ ☐

*[Signature]*

Inspector

Acknowledged Receipt : Angela Bianchi

Page 3 of 4

## Food Establishment Inspection Report - FDA

### Utensils, Equipment and Vending

	IN	OUT	COS	REPEAT
39A. Food & non-food contact surfaces cleanable	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
B. Food contact surfaces /utensils cleanability, molluscan shellfish tanks, consumer self-service	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
C. Properly designed characteristics: food and non-food contact surfaces, molluscan shellfish tanks	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
40A. Warewashing facilities: installed, maintained, & used; test strips	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
B. Operational warewashing machines	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
41. Non-food contact surfaces clean	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

### Physical Facilities

	IN	OUT	N/O	N/A	COS	REPEAT
42. Hot & cold water available; adequate pressure	<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>
43A. Plumbing installed; proper backflow devices	<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>
B. Prohibiting a cross-connection, non-drinking water, system maintained in good repair	<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>
C. Approved system and cleanable fixtures, service sink	<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>
44A. Sewage and waste water properly disposed	<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>
B. Grease traps easily accessible for cleaning	<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>
45A. Toilet facilities; properly constructed, supplied, & cleaned	<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>
B. Toilet tissue availability	<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>
46. Garbage & refuse properly disposed; facilities maintained	<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>
47A. Physical facilities installed, maintained, & clean	<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>
B. Cleaning maintenance tools, preventing contamination	<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>
48. Adequate ventilation & lighting; designated areas used	<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>

### MASSACHUSETTS ONLY REGULATIONS

Rules and Regulations adopted for use in Massachusetts only.

#### Facilities

	IN	OUT	COS	REPEAT
49A. When plans are reviewed, prerequisite for operations- valid permit	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
B. Contents of plans and specifications, preoperational inspections	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

#### Procedures

	IN	OUT	COS	REPEAT
50. Anti-choking Procedures	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
51. Tobacco Products: Notice and Sale	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

  
Inspector

Acknowledged Receipt : Angela Bianchi

Page 4 of 4



City of Newton  
Health and Human Services  
Deborah Youngblood, PhD, Commissioner  
1000 Commonwealth Ave Newton, MA 02459  
(617) 796-1420



**Public Health**  
Prevent. Promote. Protect.

Food Establishment Inspection Report - FDA

**Insp Date:** 1/22/2018  
**Business:** Lincoln Elliot School  
191 Pearl St.

Newton, MA 02458

**Business ID:** 1N2231

**Inspection:** 6N000012

**Section:** 1

**Phone:** 559-9540

**Inspector:** 1N11123 Nicola Assan

**Reason:** 1-Routine

**Results:** No Follow-up R2

Inspection Summary

Official Order for Correction: Based on an inspection today, the items checked indicate violations of 105 CMR 590.000/ 2013 Federal Food Code. This report, when signed below by the Commissioner of Health / Agent constitutes an order by the Commissioner of Health. Failure to correct violations cited in this report may result in suspension or revocation of the food establishment permit and cessation of food establishment operations. If aggrieved by this order, you have the right to a hearing. The request must be in writing and submitted to the Commissioner of Health at the above address within 10 days of receipt of this order.

Est. Type 1 - Food Svc Establis License/Permit # \_\_\_\_\_ Risk Category 02 Risk Level Observed 02 Low

Foodborne Illness Complaint Investigated (All) ☐ Involving More Than Two Persons ☐

FOODBORNE ILLNESS RISK FACTORS AND PUBLIC HEALTH INTERVENTIONS

Compliance status: IN = in compliance OUT = not in compliance N/O = not observed N/A = not applicable

Marked in appropriate box for COS and/or R. COS = corrected on-site during inspection R = repeat violation

Risk factors are improper practices or procedures identified as the most prevalent contributing factors of foodborne illness or injury. Public Health Interventions are control measures to prevent foodborne illnesses or injury.

Supervision	IN	OUT	N/O	N/A	COS	REPEAT
1. PIC Present, Knowledge and Duties	⊙	○			□	□
2. Certified Food Protection Manager	⊙	○	○		□	□
Employee Health / Responding to Contamination Events	IN	OUT	N/O	N/A	COS	REPEAT
3A. Employee Health: PIC Knowledge, Responsibilities & Reporting	⊙	○			□	□
3B. Employee Reporting to PIC	⊙	○			□	□
4. Proper Use of Restriction & Exclusion	⊙	○			□	□
5. Clean-up of Vomiting and Diarrheal Events	⊙	○			□	□
Good Hygienic Practices	IN	OUT	N/O	N/A	COS	REPEAT
6A. Proper eating, tasting, drinking, or tobacco use	⊙	○	○		□	□
6B. Preventing contamination when tasting	⊙	○	○		□	□

Inspector \_\_\_\_\_

Acknowledged Receipt : \_\_\_\_\_

Page 1 of 6

## Food Establishment Inspection Report - FDA

### Good Hygienic Practices

7. No discharge from eyes, nose, and mouth

IN	OUT	N/O	N/A	COS	REPEAT
<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>

### Control of Hands as a Vehicle of Contamination

8A. Hands clean & properly washed

IN	OUT	N/O	N/A	COS	REPEAT
<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>

8B. Where to wash, hand antiseptics

IN	OUT	N/O	N/A	COS	REPEAT
<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>

9. No bare hand contact with RTE food or a pre-approved alternative procedure properly allowed

IN	OUT	N/O	N/A	COS	REPEAT
<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

10A. Adequate handwashing sinks properly supplied and accessible

IN	OUT	N/O	N/A	COS	REPEAT
<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>

10B. Handwashing sinks accesible with proper signage, handwashing aids

IN	OUT	N/O	N/A	COS	REPEAT
<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>

### Approved Sources

11A. Milk, eggs, juice, bottled water, hermetically sealed food, game animals

IN	OUT	N/O	N/A	COS	REPEAT
<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

11B. Packaged foods, labeling, whole muscle beef

IN	OUT	N/O	N/A	COS	REPEAT
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

11C. Obtaining raw fish, packaged meat & poultry, eggs

IN	OUT	N/O	N/A	COS	REPEAT
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

12A. Food received at proper temperature

IN	OUT	N/O	N/A	COS	REPEAT
<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

12B. Shipping and receiving frozen food

IN	OUT	N/O	N/A	COS	REPEAT
<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

13. Food in good condition, honestly presented, safe, & unadulterated

IN	OUT	N/O	N/A	COS	REPEAT
<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>

13B. Food package integrity

IN	OUT	N/O	N/A	COS	REPEAT
<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>

14A. Required records available: shellstock tags, parasite destruction

IN	OUT	N/O	N/A	COS	REPEAT
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

14B. Missing shellstock tags, destruction

IN	OUT	N/O	N/A	COS	REPEAT
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

14C. Parasite destruction- storing raw/partially cooked fish

IN	OUT	N/O	N/A	COS	REPEAT
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

### Protection from Contamination

15A. Food separated & protected

IN	OUT	N/O	N/A	COS	REPEAT
<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

15B. Cleaning equip/utensils/food containers

IN	OUT	N/O	N/A	COS	REPEAT
<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

16A. Food-contact surfaces: cleaned & sanitized immersion 171° F and above

IN	OUT	N/O	N/A	COS	REPEAT
<input type="radio"/>	<input checked="" type="radio"/>		<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

*Fail Notes* | 4-501.114 (A-E, F 1&2) *Chemical Sanitization - Temperature, pH, Concentration and Hardness*  
*[The concentration of the sanitizer in the 3 bay sink was weak (less than 150ppm). The concentration of the sanitizing solution must be within the range of 150-400ppm as indicated on the manufacturers instructions.]*

16B. Food contact surfaces cleaned and sanitized NMT 194° F, NLT 180° F

IN	OUT	N/O	N/A	COS	REPEAT
<input type="radio"/>	<input type="radio"/>		<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

16C. Mechanical warewashing equipment sanitization food contact surfaces, equip., utensils

IN	OUT	N/O	N/A	COS	REPEAT
<input type="radio"/>	<input type="radio"/>		<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

17. Proper disposition of returned, previously served reconditions, & unsafe food

IN	OUT	N/O	N/A	COS	REPEAT
<input type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>

### Time/Temperature Control for Safety Food (TCS Food)

18A. Proper cooking time & temperatures

IN	OUT	N/O	N/A	COS	REPEAT
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

18B. Whole meat cooking and serving, storing

IN	OUT	N/O	N/A	COS	REPEAT
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

Inspector

Acknowledged Receipt :

Page 2 of 6

## Food Establishment Inspection Report - FDA

Time/Temperature Control for Safety Food (TCS Food)	IN	OUT	N/O	N/A	COS	REPEAT
18C. Microwave cooking of raw animal foods	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
19. Proper reheating procedures for hot holding	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
20. Proper cooling time & temperatures	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
21. Proper hot holding temperatures	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
22. Proper cold holding temperatures	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
23. Proper Date Marking	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
23B. TCS Foods Disposition	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
24A. Time as a public health control: procedures	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
24B. Time as a public health control: temperatures & discarding food	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
24C. Time as a public health control: highly susceptible population (HSP)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

Consumer Advisory	IN	OUT	N/O	N/A	COS	REPEAT
25. Consumer advisory provided for raw or undercooked foods	<input type="radio"/>	<input type="radio"/>		<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

Highly Susceptible Populations (HSP)	IN	OUT	N/O	N/A	COS	REPEAT
26A. Pasteurized foods used; prohibited foods not offered	<input type="radio"/>	<input type="radio"/>		<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
26B. Reservice of foods	<input type="radio"/>	<input type="radio"/>		<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

Chemical	IN	OUT	N/O	N/A	COS	REPEAT
27. Food additives: approved and properly used	<input type="radio"/>	<input type="radio"/>		<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
28A. Toxic substances identified, stored and used	<input checked="" type="radio"/>	<input type="radio"/>		<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
28B. Poisonous materials, sanitizers, additives, medicines restriction, separation, storage	<input checked="" type="radio"/>	<input type="radio"/>		<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
28C. Conditions of Use: law	<input checked="" type="radio"/>	<input type="radio"/>		<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

Conformance with Approved Procedures	IN	OUT	N/O	N/A	COS	REPEAT
29A. Compliance with variance, specialized process, & HACCP plan	<input type="radio"/>	<input type="radio"/>		<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
29B. Treating juice- HACCP, reduced oxygen packaging w/out variance, conformance with approved procedures	<input type="radio"/>	<input type="radio"/>		<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
29C. When HACCP plan is required	<input type="radio"/>	<input type="radio"/>		<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

### GOOD RETAIL PRACTICES

Good Retail Practices are preventative measures to control the addition of pathogens, chemicals, and physical objects into foods.

IN = In compliance    OUT = not in compliance    COS - corrected on -site during inspection    REPEAT = repeat violation

Safe Food and Water	IN	OUT	N/O	N/A	COS	REPEAT
30. Pasteurized eggs used where required	<input type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>
31A. Water & ice from approved source	<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>
31B. Sampling, alternative water supply	<input type="radio"/>	<input type="radio"/>		<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

Inspector \_\_\_\_\_

Acknowledged Receipt : \_\_\_\_\_

Page 3 of 6

## Food Establishment Inspection Report - FDA

Safe Food and Water	IN	OUT	N/O	N/A	COS	REPEAT
31C. Sampling report	<input type="radio"/>	<input type="radio"/>		<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
32. Variance obtained for specialized processing methods	<input type="radio"/>	<input type="radio"/>		<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
Food Temperature Control	IN	OUT	N/O	N/A	COS	REPEAT
33A. Proper cooling methods used; adequate equipment for temperature control	<input type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>
33B. Frozen food	<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>
34. Plant food properly cooked for hot holding	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
35. Approved thawing methods used	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
36A. Thermometers provided and accurate	<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>
36B. Thermometers function properly	<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>
Food Identification	IN	OUT	COS	REPEAT		
37A. Food properly labeled; original container		<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>	
37B. Food labels, labeling of ingredients		<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Prevention of Food Contamination	IN	OUT	COS	REPEAT		
38A. Insects, rodents, & animals not present		<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>	
38B. Handling prohibition, controlling pests, prohibiting animals		<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>	
39A. Contamination prevented during food storage		<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>	
39B. Food display; ice used as an exterior coolant prohibited as an ingredient		<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>	
39C. Consumer self-service operations- utensils and monitoring		<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>	
40A. Personal cleanliness- prohibition jewelry		<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>	
40B. Maintenance of fingernails		<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>	
41. Wiping cloths; properly used and stored		<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>	
42A. Washing Produce - following chemical manufacturers label		<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>	
42B. Washing produce		<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>	
42C. Washing produce- chemicals		<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Proper Use of Utensils	IN	OUT	COS	REPEAT		
43. In-use utensils; properly stored		<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>	
44. Utensils, equipment & linens; properly stored, dried, and handled		<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>	
45A. Single-use/ single service articles properly stored and used, required		<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>	
45B. Single-use/service articles use limitation, kitchenware and tableware preventing contamination		<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>	
46. Gloves used properly		<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Utensils, Equipment and Vending	IN	OUT	COS	REPEAT		
47A. Food & non-food contact surfaces cleanable		<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>	

Inspector \_\_\_\_\_

Acknowledged Receipt : \_\_\_\_\_

Page 4 of 6

## Food Establishment Inspection Report - FDA

### Utensils, Equipment and Vending

	IN	OUT	COS	REPEAT
47B. Food contact surfaces /utensils cleanability, molluscan shellfish tanks, consumer self-service	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
47C. Properly designed characteristics: food and non-food contact surfaces, molluscan shellfish tanks	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
48A. Warewashing facilities: installed, maintained, & used; test strips	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
48B. Operational warewashing machines	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
49. Non-food contact surfaces clean	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

### Physical Facilities

	IN	OUT	N/A	COS	REPEAT
50. Hot & cold water available; adequate pressure	<input checked="" type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>
51A. Plumbing installed; proper backflow devices	<input type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>
51B. Prohibiting a cross-connection, inspection and servicing system	<input type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>
51C. Approved system and cleanable fixtures, service sink	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
52A. Sewage and waste water properly disposed	<input checked="" type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>
52B. Grease traps easily accessible for cleaning	<input type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>
52C. Removing mobile food establishment waste	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
53A. Toilet facilities; properly constructed, supplied, & cleaned	<input type="radio"/>	<input checked="" type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>
<i>Fail Notes</i> 5-501.17 Toilet room receptacle, covered- sanitary napkins [There was no receptacle for the disposal of feminine hygiene products. Any such receptacle provided must be fitted with a lid.]					
53B. Toilet tissue availability	<input checked="" type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>
54. Garbage & refuse properly disposed; facilities maintained	<input checked="" type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>
55A. Physical facilities installed, maintained, & clean	<input checked="" type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>
55B. Private homes and living or sleeping quarters, use prohibition	<input checked="" type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>
56. Adequate ventilation & lighting; designated areas used	<input type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>

### MASSACHUSETTS ONLY REGULATIONS

Rules and Regulations adopted for use in Massachusetts only.

### Facilities

	IN	OUT	COS	REPEAT
57A. Catering	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
57B. When plans are reviewed, prerequisite for operations- valid permit	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
57C. Contents of plans and specifications, preoperational inspections	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
58. Mobile Food Operations	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
59. Temporary Food Establishments	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
60. Residential Kitchens	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

### Procedures

	IN	OUT	COS	REPEAT
61. Anti-choking Procedures	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

Inspector \_\_\_\_\_

Acknowledged Receipt : \_\_\_\_\_

Page 5 of 6

## Food Establishment Inspection Report - FDA

### Procedures

62. Tobacco Products: Notice and Sale

63. Food Allergy Awareness Requirements

IN OUT COS REPEAT

☐ ☐ ☐ ☐

☐ ☐ ☐ ☐

Inspector

Acknowledged Receipt :

Page 6 of 6



City of Newton  
Health and Human Services  
Deborah Youngblood, PhD, Commissioner  
1000 Commonwealth Ave Newton, MA 02459  
(617) 796-1420



Public Health  
Prevent. Promote. Protect.

Food Establishment Inspection Report - FDA

Insp Date: 10/22/2018 Business ID: 1N2231

Business: Lincoln Elliot School  
191 Pearl St.

Newton, MA 02458

Inspection: 6N000056

Section: 1

Phone: 559-9540

Inspector: 1N11123 Nicola Assan

Reason: 1-Routine

Results: No Follow-up R2

Inspection Summary

Official Order for Correction: Based on an inspection today, the items checked indicate violations of 105 CMR 590.000/ 2013 Federal Food Code. This report, when signed below by the Commissioner of Health / Agent constitutes an order by the Commissioner of Health. Failure to correct violations cited in this report may result in suspension or revocation of the food establishment permit and cessation of food establishment operations. If aggrieved by this order, you have the right to a hearing. The request must be in writing and submitted to the Commissioner of Health at the above address within 10 days of receipt of this order.

Est. Type 1 - Food Svc Establis License/Permit # \_\_\_\_\_ Risk Category 02 Risk Level Observed 02 Low

Foodborne Illness Complaint Investigated (All) ☐ Involving More Than Two Persons ☐

FOODBORNE ILLNESS RISK FACTORS AND PUBLIC HEALTH INTERVENTIONS

Compliance status: IN = in compliance OUT = not in compliance N/O = not observed N/A = not applicable

Marked in appropriate box for COS and/or R. COS = corrected on-site during inspection R = repeat violation

Risk factors are improper practices or procedures identified as the most prevalent contributing factors of foodborne illness or injury. Public Health Interventions are control measures to prevent foodborne illnesses or injury.

Supervision

1. PIC Present, Knowledge and Duties

IN	OUT	N/O	N/A	COS	REPEAT
<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>

2. Certified Food Protection Manager

<input checked="" type="radio"/>	<input type="radio"/>		<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
----------------------------------	-----------------------	--	-----------------------	--------------------------	--------------------------

*This item has Notes. See Footnote 1 at end of questionnaire.*

Employee Health / Responding to Contamination Events

3A. Employee Health: PIC Knowledge, Responsibilities & Reporting

<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>
----------------------------------	-----------------------	--	--	--------------------------	--------------------------

3B. Employee Reporting to PIC

<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>
----------------------------------	-----------------------	--	--	--------------------------	--------------------------

4. Proper Use of Restriction & Exclusion

<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>
----------------------------------	-----------------------	--	--	--------------------------	--------------------------

5. Clean-up of Vomiting and Diarrheal Events

<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>
----------------------------------	-----------------------	--	--	--------------------------	--------------------------

Good Hygienic Practices

6A. Proper eating, tasting, drinking, or tobacco use

<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>
----------------------------------	-----------------------	-----------------------	--	--------------------------	--------------------------

6B. Preventing contamination when tasting

<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>
----------------------------------	-----------------------	-----------------------	--	--------------------------	--------------------------

*Assan*

Inspector

Acknowledged Receipt : Tim Viveiros

Page 1 of 6

## Food Establishment Inspection Report - FDA

### Good Hygienic Practices

7. No discharge from eyes, nose, and mouth

IN	OUT	N/O	N/A	COS	REPEAT
<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>

### Control of Hands as a Vehicle of Contamination

8A. Hands clean & properly washed

IN	OUT	N/O	N/A	COS	REPEAT
<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>

8B. Where to wash, hand antiseptics

IN	OUT	N/O	N/A	COS	REPEAT
<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>

9. No bare hand contact with RTE food or a pre-approved alternative procedure properly allowed

IN	OUT	N/O	N/A	COS	REPEAT
<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

10A. Adequate handwashing sinks properly supplied and accessible

IN	OUT	N/O	N/A	COS	REPEAT
<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>

10B. Handwashing sinks accesible with proper signage, handwashing aids

IN	OUT	N/O	N/A	COS	REPEAT
<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>

### Approved Sources

11A. Milk, eggs, juice, bottled water, hermetically sealed food, game animals

IN	OUT	N/O	N/A	COS	REPEAT
<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

11B. Packaged foods, labeling, whole muscle beef

IN	OUT	N/O	N/A	COS	REPEAT
<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

11C. Obtaining raw fish, packaged meat & poultry, eggs

IN	OUT	N/O	N/A	COS	REPEAT
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

12A. Food received at proper temperature

IN	OUT	N/O	N/A	COS	REPEAT
<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

12B. Shipping and receiving frozen food

IN	OUT	N/O	N/A	COS	REPEAT
<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

13. Food in good condition, honestly presented, safe, & unadulterated

IN	OUT	N/O	N/A	COS	REPEAT
<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>

13B. Food package integrity

IN	OUT	N/O	N/A	COS	REPEAT
<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>

14A. Required records available: shellstock tags, parasite destruction

IN	OUT	N/O	N/A	COS	REPEAT
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

14B. Missing shellstock tags, destruction

IN	OUT	N/O	N/A	COS	REPEAT
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

14C. Parasite destruction- storing raw/partially cooked fish

IN	OUT	N/O	N/A	COS	REPEAT
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

### Protection from Contamination

15A. Food separated & protected

IN	OUT	N/O	N/A	COS	REPEAT
<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

15B. Cleaning equip/utensils/food containers

IN	OUT	N/O	N/A	COS	REPEAT
<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

16A. Food-contact surfaces: cleaned & sanitized immersion 171° F and above

IN	OUT	N/O	N/A	COS	REPEAT
<input checked="" type="radio"/>	<input type="radio"/>		<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

16B. Food contact surfaces cleaned and sanitized NMT 194° F, NLT 180° F

IN	OUT	N/O	N/A	COS	REPEAT
<input checked="" type="radio"/>	<input type="radio"/>		<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

16C. Mechanical warewashing equipment sanitization food contact surfaces, equip., utensils

IN	OUT	N/O	N/A	COS	REPEAT
<input type="radio"/>	<input type="radio"/>		<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

17. Proper disposition of returned, previously served reconditions, & unsafe food

IN	OUT	N/O	N/A	COS	REPEAT
<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>

### Time/Temperature Control for Safety Food (TCS Food)

18A. Proper cooking time & temperatures

IN	OUT	N/O	N/A	COS	REPEAT
<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

18B. Whole meat cooking and serving, storing

IN	OUT	N/O	N/A	COS	REPEAT
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

18C. Microwave cooking of raw animal foods

IN	OUT	N/O	N/A	COS	REPEAT
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

19. Proper reheating procedures for hot holding

IN	OUT	N/O	N/A	COS	REPEAT
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

20. Proper cooling time & temperatures

IN	OUT	N/O	N/A	COS	REPEAT
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

21. Proper hot holding temperatures

IN	OUT	N/O	N/A	COS	REPEAT
<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>



Inspector

Acknowledged Receipt : Tim Viveiros

Page 2 of 6

## Food Establishment Inspection Report - FDA

### Time/Temperature Control for Safety Food (TCS Food)

	IN	OUT	N/O	N/A	COS	REPEAT
22. Proper cold holding temperatures	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
23. Proper Date Marking	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
23B. TCS Foods Disposition	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
24A. Time as a public health control: procedures	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
24B. Time as a public health control: temperatures & discarding food	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
24C. Time as a public health control: highly susceptible population (HSP)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

### Consumer Advisory

	IN	OUT	N/O	N/A	COS	REPEAT
25. Consumer advisory provided for raw or undercooked foods	<input type="radio"/>	<input type="radio"/>		<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

### Highly Susceptible Populations (HSP)

	IN	OUT	N/O	N/A	COS	REPEAT
26A. Pasteurized foods used; prohibited foods not offered	<input type="radio"/>	<input type="radio"/>		<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
26B. Reservice of foods	<input type="radio"/>	<input type="radio"/>		<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

### Chemical

	IN	OUT	N/O	N/A	COS	REPEAT
27. Food additives: approved and properly used	<input type="radio"/>	<input type="radio"/>		<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
28A. Toxic substances identified, stored and used	<input checked="" type="radio"/>	<input type="radio"/>		<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
28B. Poisonous materials, sanitizers, additives, medicines restriction, separation, storage	<input checked="" type="radio"/>	<input type="radio"/>		<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
28C. Conditions of Use: law	<input checked="" type="radio"/>	<input type="radio"/>		<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

### Conformance with Approved Procedures

	IN	OUT	N/O	N/A	COS	REPEAT
29A. Compliance with variance, specialized process, & HACCP plan	<input type="radio"/>	<input type="radio"/>		<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
29B. Treating juice- HACCP, reduced oxygen packaging w/out variance, conformance with approved procedures	<input type="radio"/>	<input type="radio"/>		<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
29C. When HACCP plan is required	<input type="radio"/>	<input type="radio"/>		<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

### GOOD RETAIL PRACTICES

Good Retail Practices are preventative measures to control the addition of pathogens, chemicals, and physical objects into foods.

IN = In compliance    OUT = not in compliance    COS - corrected on -site during inspection    REPEAT = repeat violation

### Safe Food and Water

	IN	OUT	N/O	N/A	COS	REPEAT
30. Pasteurized eggs used where required	<input type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>
31A. Water & ice from approved source	<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>
31B. Sampling, alternative water supply	<input type="radio"/>	<input type="radio"/>		<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
31C. Sampling report	<input type="radio"/>	<input type="radio"/>		<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
32. Variance obtained for specialized processing methods	<input type="radio"/>	<input type="radio"/>		<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

### Food Temperature Control

	IN	OUT	N/O	N/A	COS	REPEAT
33A. Proper cooling methods used; adequate equipment for temperature control	<input type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>

  
Inspector

Acknowledged Receipt : Tim Viveiros

Page 3 of 6

## Food Establishment Inspection Report - FDA

Food Temperature Control	IN	OUT	N/O	N/A	COS	REPEAT
33B. Frozen food	<input type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>
34. Plant food properly cooked for hot holding	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
35. Approved thawing methods used	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
36A. Thermometers provided and accurate	<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>
36B. Thermometers function properly	<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>

Food Identification	IN	OUT	COS	REPEAT
37A. Food properly labeled; original container	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
37B. Food labels, labeling of ingredients	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

Prevention of Food Contamination	IN	OUT	COS	REPEAT
38A. Insects, rodents, & animals not present	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
38B. Handling prohibition, controlling pests, prohibiting animals	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
39A. Contamination prevented during food storage	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
39B. Food display; ice used as an exterior coolant prohibited as an ingredient	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
39C. Consumer self-service operations- utensils and monitoring	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
40A. Personal cleanliness- prohibition jewelry	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
40B. Maintenance of fingernails	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
41. Wiping cloths; properly used and stored	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
42A. Washing Produce - following chemical manufacturers label	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
42B. Washing produce	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
42C. Washing produce- chemicals	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

Proper Use of Utensils	IN	OUT	COS	REPEAT
43. In-use utensils; properly stored	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
44. Utensils, equipment & linens; properly stored, dried, and handled	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
45A. Single-use/ single service articles properly stored and used, required	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
45B. Single-use/service articles use limitation, kitchenware and tableware preventing contamination	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
46. Gloves used properly	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

Utensils, Equipment and Vending	IN	OUT	COS	REPEAT
47A. Food & non-food contact surfaces cleanable	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
47B. Food contact surfaces /utensils cleanability, molluscan shellfish tanks, consumer self-service	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
47C. Properly designed characteristics: food and non-food contact surfaces, molluscan shellfish tanks	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
48A. Warewashing facilities: installed, maintained, & used; test strips	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
48B. Operational warewashing machines	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>



Inspector

Acknowledged Receipt : Tim Viveiros

Page 4 of 6

## Food Establishment Inspection Report - FDA

### Utensils, Equipment and Vending

49. Non-food contact surfaces clean

IN	OUT	COS	REPEAT
<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

### Physical Facilities

50. Hot & cold water available; adequate pressure

IN	OUT	N/A	COS	REPEAT
<input checked="" type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>

51A. Plumbing installed; proper backflow devices

<input type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>
-----------------------	-----------------------	--	--------------------------	--------------------------

51B. Prohibiting a cross-connection, inspection and servicing system

<input type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>
-----------------------	-----------------------	--	--------------------------	--------------------------

51C. Approved system and cleanable fixtures, service sink

<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
-----------------------	-----------------------	-----------------------	--------------------------	--------------------------

52A. Sewage and waste water properly disposed

<input checked="" type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>
----------------------------------	-----------------------	--	--------------------------	--------------------------

52B. Grease traps easily accessible for cleaning

<input type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>
-----------------------	-----------------------	--	--------------------------	--------------------------

52C. Removing mobile food establishment waste

<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
-----------------------	-----------------------	----------------------------------	--------------------------	--------------------------

53A. Toilet facilities; properly constructed, supplied, & cleaned

<input checked="" type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>
----------------------------------	-----------------------	--	--------------------------	--------------------------

53B. Toilet tissue availability

<input checked="" type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>
----------------------------------	-----------------------	--	--------------------------	--------------------------

54. Garbage & refuse properly disposed; facilities maintained

<input checked="" type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>
----------------------------------	-----------------------	--	--------------------------	--------------------------

55A. Physical facilities installed, maintained, & clean

<input checked="" type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>
----------------------------------	-----------------------	--	--------------------------	--------------------------

55B. Private homes and living or sleeping quarters, use prohibition

<input checked="" type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>
----------------------------------	-----------------------	--	--------------------------	--------------------------

56. Adequate ventilation & lighting; designated areas used

<input checked="" type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>
----------------------------------	-----------------------	--	--------------------------	--------------------------

### MASSACHUSETTS ONLY REGULATIONS

Rules and Regulations adopted for use in Massachusetts only.

#### Facilities

57A. Catering

IN	OUT	COS	REPEAT
<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

57B. When plans are reviewed, prerequisite for operations- valid permit

<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
-----------------------	-----------------------	--------------------------	--------------------------

57C. Contents of plans and specifications, preoperational inspections

<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
-----------------------	-----------------------	--------------------------	--------------------------

58. Mobile Food Operations

<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
-----------------------	-----------------------	--------------------------	--------------------------

59. Temporary Food Establishments

<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
-----------------------	-----------------------	--------------------------	--------------------------

60. Residential Kitchens

<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
-----------------------	-----------------------	--------------------------	--------------------------

#### Procedures

61. Anti-choking Procedures

<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
-----------------------	-----------------------	--------------------------	--------------------------

62. Tobacco Products: Notice and Sale

<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
-----------------------	-----------------------	--------------------------	--------------------------

63. Food Allergy Awareness Requirements

<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
-----------------------	-----------------------	--------------------------	--------------------------

Inspector

Acknowledged Receipt : Tim Viveiros

Page 5 of 6

Food Establishment Inspection Report - FDA

**Footnote 1**

**Notes:**

Serv safe certificate expires 12/12/2018.



Inspector

Acknowledged Receipt : Tim Viveiros

Page 6 of 6



City of Newton  
Health and Human Services  
Deborah Youngblood, PhD, Commissioner  
1000 Commonwealth Ave Newton, MA 02459  
(617) 796-1420



**Public Health**  
Prevent. Promote. Protect.

Food Establishment Inspection Report - FDA

**Insp Date:** 5/2/2019 **Business ID:** 1N2231  
**Business:** Lincoln Elliot School  
191 Pearl St.  
Newton, MA 02458

**Inspection:** 6N000113  
**Section:** 1  
**Phone:** 559-9540  
**Inspector:** 1N11123 Nicola Assan  
**Reason:** 1-Routine  
**Results:** No Follow-up R2

Inspection Summary

Official Order for Correction: Based on an inspection today, the items checked indicate violations of 105 CMR 590.000/ 2013 Federal Food Code. This report, when signed below by the Commissioner of Health / Agent constitutes an order by the Commissioner of Health. Failure to correct violations cited in this report may result in suspension or revocation of the food establishment permit and cessation of food establishment operations. If aggrieved by this order, you have the right to a hearing. The request must be in writing and submitted to the Commissioner of Health at the above address within 10 days of receipt of this order.

Est. Type 1 - Food Svc Establis License/Permit # \_\_\_\_\_ Risk Category 02 Risk Level Observed 02 Low

Foodborne Illness Complaint Investigated (All) ☐ Involving More Than Two Persons ☐

FOODBORNE ILLNESS RISK FACTORS AND PUBLIC HEALTH INTERVENTIONS

Compliance status: IN = in compliance OUT = not in compliance N/O = not observed N/A = not applicable

Marked in appropriate box for COS and/or R. COS = corrected on-site during inspection R = repeat violation

Risk factors are improper practices or procedures identified as the most prevalent contributing factors of foodborne illness or injury. Public Health Interventions are control measures to prevent foodborne illnesses or injury.

Supervision

1. PIC Present, Knowledge and Duties
2. Certified Food Protection Manager

IN	OUT	N/O	N/A	COS	REPEAT
<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>
<input checked="" type="radio"/>	<input type="radio"/>		<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

Employee Health / Responding to Contamination Events

- 3A. Employee Health: PIC Knowledge, Responsibilities & Reporting
- 3B. Employee Reporting to PIC
4. Proper Use of Restriction & Exclusion
5. Clean-up of Vomiting and Diarrheal Events

IN	OUT	N/O	N/A	COS	REPEAT
<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>
<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>
<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>
<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>

Good Hygienic Practices

- 6A. Proper eating, tasting, drinking, or tobacco use
- 6B. Preventing contamination when tasting

IN	OUT	N/O	N/A	COS	REPEAT
<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>
<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>

*Assan*

Inspector

Acknowledged Receipt : Tim Viveiros

Page 1 of 5

## Food Establishment Inspection Report - FDA

### Good Hygienic Practices

7. No discharge from eyes, nose, and mouth

IN	OUT	N/O	N/A	COS	REPEAT
<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>

### Control of Hands as a Vehicle of Contamination

8A. Hands clean & properly washed

IN	OUT	N/O	N/A	COS	REPEAT
<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>

8B. Where to wash, hand antiseptics

IN	OUT	N/O	N/A	COS	REPEAT
<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>

9. No bare hand contact with RTE food or a pre-approved alternative procedure properly allowed

IN	OUT	N/O	N/A	COS	REPEAT
<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

10A. Adequate handwashing sinks properly supplied and accessible

IN	OUT	N/O	N/A	COS	REPEAT
<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>

10B. Handwashing sinks accessible with proper signage, handwashing aids

IN	OUT	N/O	N/A	COS	REPEAT
<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>

### Approved Sources

11A. Milk, eggs, juice, bottled water, hermetically sealed food, game animals

IN	OUT	N/O	N/A	COS	REPEAT
<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

11B. Packaged foods, labeling, whole muscle beef

IN	OUT	N/O	N/A	COS	REPEAT
<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

11C. Obtaining raw fish, packaged meat & poultry, eggs

IN	OUT	N/O	N/A	COS	REPEAT
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

12A. Food received at proper temperature

IN	OUT	N/O	N/A	COS	REPEAT
<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

12B. Shipping and receiving frozen food

IN	OUT	N/O	N/A	COS	REPEAT
<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

13. Food in good condition, honestly presented, safe, & unadulterated

IN	OUT	N/O	N/A	COS	REPEAT
<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>

13B. Food package integrity

IN	OUT	N/O	N/A	COS	REPEAT
<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>

14A. Required records available: shellstock tags, parasite destruction

IN	OUT	N/O	N/A	COS	REPEAT
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

14B. Missing shellstock tags, destruction

IN	OUT	N/O	N/A	COS	REPEAT
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

14C. Parasite destruction- storing raw/partially cooked fish

IN	OUT	N/O	N/A	COS	REPEAT
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

### Protection from Contamination

15A. Food separated & protected

IN	OUT	N/O	N/A	COS	REPEAT
<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

15B. Cleaning equip/utensils/food containers

IN	OUT	N/O	N/A	COS	REPEAT
<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

16A. Food-contact surfaces: cleaned & sanitized immersion 171° F and above

IN	OUT	N/O	N/A	COS	REPEAT
<input checked="" type="radio"/>	<input type="radio"/>		<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

16B. Food contact surfaces cleaned and sanitized NMT 194° F, NLT 180° F

IN	OUT	N/O	N/A	COS	REPEAT
<input checked="" type="radio"/>	<input type="radio"/>		<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

16C. Mechanical warewashing equipment sanitization food contact surfaces, equip., utensils

IN	OUT	N/O	N/A	COS	REPEAT
<input checked="" type="radio"/>	<input type="radio"/>		<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

17. Proper disposition of returned, previously served reconditions, & unsafe food

IN	OUT	N/O	N/A	COS	REPEAT
<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>

### Time/Temperature Control for Safety Food (TCS Food)

18A. Proper cooking time & temperatures

IN	OUT	N/O	N/A	COS	REPEAT
<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

18B. Whole meat cooking and serving, storing

IN	OUT	N/O	N/A	COS	REPEAT
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

18C. Microwave cooking of raw animal foods

IN	OUT	N/O	N/A	COS	REPEAT
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

19. Proper reheating procedures for hot holding

IN	OUT	N/O	N/A	COS	REPEAT
<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

20. Proper cooling time & temperatures

IN	OUT	N/O	N/A	COS	REPEAT
<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

21. Proper hot holding temperatures

IN	OUT	N/O	N/A	COS	REPEAT
<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

*Assan*

Inspector

Acknowledged Receipt : Tim Viveiros

Page 2 of 5

## Food Establishment Inspection Report - FDA

### Time/Temperature Control for Safety Food (TCS Food)

	IN	OUT	N/O	N/A	COS	REPEAT
22. Proper cold holding temperatures	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
23. Proper Date Marking	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
23B. TCS Foods Disposition	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
24A. Time as a public health control: procedures	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
24B. Time as a public health control: temperatures & discarding food	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
24C. Time as a public health control: highly susceptible population (HSP)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

### Consumer Advisory

25. Consumer advisory provided for raw or undercooked foods	<input type="radio"/>	<input type="radio"/>		<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
---	-----------------------	-----------------------	--	----------------------------------	--------------------------	--------------------------

### Highly Susceptible Populations (HSP)

	IN	OUT	N/O	N/A	COS	REPEAT
26A. Pasteurized foods used; prohibited foods not offered	<input type="radio"/>	<input type="radio"/>		<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
26B. Reservice of foods	<input type="radio"/>	<input type="radio"/>		<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

### Chemical

	IN	OUT	N/O	N/A	COS	REPEAT
27. Food additives: approved and properly used	<input type="radio"/>	<input type="radio"/>		<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
28A. Toxic substances identified, stored and used	<input checked="" type="radio"/>	<input type="radio"/>		<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
28B. Poisonous materials, sanitizers, additives, medicines restriction, separation, storage	<input checked="" type="radio"/>	<input type="radio"/>		<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
28C. Conditions of Use: law	<input checked="" type="radio"/>	<input type="radio"/>		<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

### Conformance with Approved Procedures

	IN	OUT	N/O	N/A	COS	REPEAT
29A. Compliance with variance, specialized process, & HACCP plan	<input type="radio"/>	<input type="radio"/>		<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
29B. Treating juice- HACCP, reduced oxygen packaging w/out variance, conformance with approved procedures	<input type="radio"/>	<input type="radio"/>		<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
29C. When HACCP plan is required	<input type="radio"/>	<input type="radio"/>		<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

### GOOD RETAIL PRACTICES

Good Retail Practices are preventative measures to control the addition of pathogens, chemicals, and physical objects into foods.

IN = In compliance    OUT = not in compliance    COS - corrected on -site during inspection    REPEAT = repeat violation

### Safe Food and Water

	IN	OUT	N/O	N/A	COS	REPEAT
30. Pasteurized eggs used where required	<input type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>
31A. Water & ice from approved source	<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>
31B. Sampling, alternative water supply	<input type="radio"/>	<input type="radio"/>		<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
31C. Sampling report	<input type="radio"/>	<input type="radio"/>		<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
32. Variance obtained for specialized processing methods	<input type="radio"/>	<input type="radio"/>		<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

### Food Temperature Control

	IN	OUT	N/O	N/A	COS	REPEAT
33A. Proper cooling methods used; adequate equipment for temperature control	<input type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>

*Assan*

Inspector

Acknowledged Receipt : Tim Viveiros

Page 3 of 5

# Food Establishment Inspection Report - FDA

Food Temperature Control	IN	OUT	N/O	N/A	COS	REPEAT
33B. Frozen food	<input type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>
34. Plant food properly cooked for hot holding	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
35. Approved thawing methods used	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
36A. Thermometers provided and accurate	<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>
36B. Thermometers function properly	<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>

Food Identification	IN	OUT	COS	REPEAT
37A. Food properly labeled; original container	<input type="radio"/>	<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

Fail Notes	3-302.12	Food Storage Containers Identified with Common Name of Food [The squeeze bottles containing syrup were not labeled. Except for containers holding food that can be readily and unmistakably recognized such as dry pasta, working containers holding food or food ingredients that are removed from their original packages for use in the food establishment, shall be identified with the common name of the food.]
------------	----------	--

37B. Food labels, labeling of ingredients ☒ ☐ ☐ ☐

Prevention of Food Contamination	IN	OUT	COS	REPEAT
38A. Insects, rodents, & animals not present	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
38B. Handling prohibition, controlling pests, prohibiting animals	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
39A. Contamination prevented during food storage	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
39B. Food display; ice used as an exterior coolant prohibited as an ingredient	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
39C. Consumer self-service operations- utensils and monitoring	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
40A. Personal cleanliness- prohibition jewelry	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
40B. Maintenance of fingernails	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
41. Wiping cloths; properly used and stored	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
42A. Washing Produce - following chemical manufacturers label	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
42B. Washing produce	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
42C. Washing produce- chemicals	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

Proper Use of Utensils	IN	OUT	COS	REPEAT
43. In-use utensils; properly stored	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
44. Utensils, equipment & linens; properly stored, dried, and handled	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
45A. Single-use/ single service articles properly stored and used, required	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
45B. Single-use/service articles use limitation, kitchenware and tableware preventing contamination	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
46. Gloves used properly	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

Utensils, Equipment and Vending	IN	OUT	COS	REPEAT
47A. Food & non-food contact surfaces cleanable	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

Asson

## Food Establishment Inspection Report - FDA

### Utensils, Equipment and Vending

	IN	OUT	COS	REPEAT
47B. Food contact surfaces /utensils cleanability, molluscan shellfish tanks, consumer self-service	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
47C. Properly designed characteristics: food and non-food contact surfaces, molluscan shellfish tanks	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
48A. Warewashing facilities: installed, maintained, & used; test strips	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
48B. Operational warewashing machines	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
49. Non-food contact surfaces clean	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

### Physical Facilities

	IN	OUT	N/A	COS	REPEAT
50. Hot & cold water available; adequate pressure	<input checked="" type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>
51A. Plumbing installed; proper backflow devices	<input checked="" type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>
51B. Prohibiting a cross-connection, inspection and servicing system	<input checked="" type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>
51C. Approved system and cleanable fixtures, service sink	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
52A. Sewage and waste water properly disposed	<input checked="" type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>
52B. Grease traps easily accessible for cleaning	<input checked="" type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>
52C. Removing mobile food establishment waste	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
53A. Toilet facilities; properly constructed, supplied, & cleaned	<input checked="" type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>
53B. Toilet tissue availability	<input checked="" type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>
54. Garbage & refuse properly disposed; facilities maintained	<input checked="" type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>
55A. Physical facilities installed, maintained, & clean	<input checked="" type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>
55B. Private homes and living or sleeping quarters, use prohibition	<input checked="" type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>
56. Adequate ventilation & lighting; designated areas used	<input checked="" type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>

### MASSACHUSETTS ONLY REGULATIONS

Rules and Regulations adopted for use in Massachusetts only.

#### Facilities

	IN	OUT	COS	REPEAT
57A. Catering	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
57B. When plans are reviewed, prerequisite for operations- valid permit	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
57C. Contents of plans and specifications, preoperational inspections	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
58. Mobile Food Operations	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
59. Temporary Food Establishments	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
60. Residential Kitchens	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

#### Procedures

	IN	OUT	COS	REPEAT
61. Anti-choking Procedures	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
62. Tobacco Products: Notice and Sale	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
63. Food Allergy Awareness Requirements	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

*Assan*

Inspector

Acknowledged Receipt : Tim Viveiros

Page 5 of 5



**City of Newton**  
**Health and Human Services**  
 Deborah Youngblood, PhD, Commissioner  
 1000 Commonwealth Ave Newton, MA 02459  
 (617) 796-1420



**Public Health**  
 Prevent, Promote, Protect.

**Food Establishment Inspection Report - FDA**

**Insp Date:** 3/17/2017      **Business ID:** 1N2244

**Business:** Mason Rice School  
 149 Pleasant St.

Newton, MA 02459

**Inspection:** 5N000292

**Section:** 2

**Phone:** 559-9570

**Inspector:** 1N81219 Kyle Simpson

**Reason:** 1-Routine

**Results:** No Follow-up

**Inspection Summary**

Official Order for Correction: Based on an inspection today, the items checked indicate violations of 105 CMR 590.000/ 2009 Federal Food Code. This report, when signed below by the Commissioner of Health / Agent constitutes an order by the Commissioner of Health. Failure to correct violations cited in this report may result in suspension or revocation of the food establishment permit and cessation of food establishment operations. If aggrieved by this order, you have the right to a hearing. The request must be in writing and submitted to the Commissioner of Health at the above address within 10 days of receipt of this order.

Est. Type 1 - Food Svc Establish License/Permit # 2781 Risk Category 02 Risk Level Observed 02 Low

**FOODBORNE ILLNESS RISK FACTORS AND PUBLIC HEALTH INTERVENTIONS**

Compliance status: IN = in compliance OUT = not in compliance N/O = not observed N/A = not applicable

Marked in appropriate box for COS and/or R. COS = corrected on-site during inspection R = repeat violation

Risk factors are improper practices or procedures identified as the most prevalent contributing factors of foodborne illness or injury. Public Health Interventions are control measures to prevent foodborne illnesses or injury.

**Supervision**

1A. PIC Present

IN OUT N/O N/A COS REPEAT

☒ ☐ ☐ ☐ ☐ ☐

B. Cert. food manager, knowledge, no critical violations

☐ ☒ ☐ ☐ ☐ ☐

*Fail Notes* | 2-102.20 *Food Protection Manager Certification*  
 [The PIC does not have a certified food managers certificate.  
 Employees should be trained and have certificate onsite.]

C. Duties of PIC

☒ ☐ ☐ ☐ ☐ ☐

**Employee Health**

2. Management, food employee and conditional employee; knowledge, responsibilities and reporting

☒ ☐ ☐ ☐ ☐ ☐

3. Proper use of restriction and exclusion

☒ ☐ ☐ ☐ ☐ ☐

**Good Hygienic Practices**

IN OUT N/O N/A COS REPEAT

4A. Proper eating, tasting, drinking, or tobacco use

☒ ☐ ☐ ☐ ☐ ☐

*Kyle G.*

Inspector

Acknowledged Receipt : Cynthia

Page 1 of 5

## Food Establishment Inspection Report - FDA

### Good Hygienic Practices

B. Preventing contamination when tasting

5. No discharge from eyes, nose, and mouth

### Preventing Contamination by Hands

6A. Hands clean & properly washed

B. Where to wash, hand antiseptics

7. No bare hand contact with RTE food or a pre-approved alternative procedure properly allowed

8A. Adequate handwashing sinks properly supplied and accessible

B. Handwashing sinks accessible with proper signage, handwashing aids

C. Conveniently located handwashing sink

### Approved Sources

9A. Milk, eggs, juice, bottled water, hermetically sealed food

B. Fish and shellfish

10. Food received at proper temperature

11. Food in good condition, safe, & unadulterated

### Protection from Contamination

12A. Food separated & protected

B. Gloves, use limitation, one task- contaminated

13A. Food-contact surfaces: cleaned & sanitized 171° F

B. Food contact surfaces cleaned and sanitized NMT 194° F, NLT 180° F

C. Mechanical warewashing equipment sanitization food contact surfaces, equip., utensils

14. Proper disposition of returned, previously served reconditions, & unsafe food

### Potentially Hazardous Food Time/Temperature

15. Proper cooking time & temperatures

16. Proper reheating procedures for hot holding

17. Proper cooling time & temperatures

18. Proper hot holding temperatures

19. Proper cold holding temperatures

20. Time as a public health control: procedures & record

### Highly Susceptible Populations

21. Pasteurized foods used; prohibited foods not offered

### Chemical

22. Food additives: approved and properly used

IN OUT N/O N/A COS REPEAT

☐ ☐ ☒ ☐ ☐

☒ ☐ ☐ ☐ ☐

IN OUT N/O N/A COS REPEAT

☒ ☐ ☐ ☐ ☐

☒ ☐ ☐ ☐ ☐

☒ ☐ ☐ ☐ ☐ ☐

☒ ☐ ☐ ☐ ☐

☒ ☐ ☐ ☐ ☐

☒ ☐ ☐ ☐ ☐

IN OUT N/O N/A COS REPEAT

☒ ☐ ☐ ☐

☐ ☐ ☐ ☒ ☐ ☐

☐ ☐ ☒ ☐ ☐ ☐

☒ ☐ ☐ ☐ ☐

IN OUT N/O N/A COS REPEAT

☒ ☐ ☐ ☐ ☐ ☐

☒ ☐ ☐ ☐ ☐ ☐

☒ ☐ ☐ ☐ ☐ ☐

☐ ☐ ☐ ☒ ☐ ☐

☒ ☐ ☐ ☐ ☐ ☐

☒ ☐ ☐ ☐

IN OUT N/O N/A COS REPEAT

☐ ☐ ☐ ☒ ☐ ☐

☒ ☐ ☐ ☐ ☐ ☐

☐ ☐ ☐ ☒ ☐ ☐

☒ ☐ ☐ ☐ ☐ ☐

☒ ☐ ☐ ☐ ☐ ☐

☐ ☐ ☐ ☒ ☐ ☐

IN OUT N/O N/A COS REPEAT

☐ ☐ ☐ ☒ ☐ ☐

IN OUT N/O N/A COS REPEAT

☐ ☐ ☐ ☒ ☐ ☐

*Hyle L.*

Inspector

Acknowledged Receipt : Cynthia

Page 2 of 5

## Food Establishment Inspection Report - FDA

Chemical	IN	OUT	N/O	N/A	COS	REPEAT
23A. Toxic substances properly identified, stored and used	<input checked="" type="radio"/>	<input type="radio"/>		<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
B. Restriction presence and use, restriction and storage of medicines	<input checked="" type="radio"/>	<input type="radio"/>		<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
C. Storage- other personal care items	<input checked="" type="radio"/>	<input type="radio"/>		<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

### GOOD RETAIL PRACTICES

Good Retail Practices are preventative measures to control the addition of pathogens, chemicals, and physical objects into foods.

IN = In compliance OUT = not in compliance COS - corrected on -site during inspection REPEAT = repeat violation

Safe Food and Water	IN	OUT	N/O	N/A	COS	REPEAT
24. Water & ice from approved source	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
Food Temperature Control	IN	OUT	N/O	N/A	COS	REPEAT
25A. Proper cooling methods used; adequate equipment for temperature control	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
B. Frozen food	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
26. Plant food properly cooked for hot holding	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
27. Approved thawing methods used	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
28A. Thermometers provided and accurate	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
B. Thermometers function properly	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

Food Identification	IN	OUT	COS	REPEAT
29A. Food properly labeled; original container	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
B. Food labels, labeling of ingredients	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

Prevention of Food Contamination	IN	OUT	COS	REPEAT
30A. Insects, rodents, & animals not present	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
B. Handling prohibition, controlling pests, prohibiting animals	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
31A. Contamination prevented during food storage	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
B. Food display; ice used as an exterior coolant prohibited as an ingredient	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
C. Consumer self-service operations- utensils and monitoring	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
32A. Personal cleanliness- prohibition jewelry	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
B. Maintenance of fingernails	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
33. Wiping cloths; properly used and stored	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
34. Washing fruits & vegetables	<input type="radio"/>	<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

*Fail Notes*    3-302.15    *Washing Fruits and Vegetables*  
*[Upon discussion with the person in charge they are currently not washing apples, etc before giving them out. Produce needs to be washed before service.]*

Proper Use of Utensils	IN	OUT	COS	REPEAT
35. In-use utensils; properly stored	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

*Kyle G.*

Inspector

Acknowledged Receipt : Cynthia

Page 3 of 5

## Food Establishment Inspection Report - FDA

### Proper Use of Utensils

	IN	OUT	COS	REPEAT
36. Utensils, equipment & linens; properly stored, dried, and handled	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
37A. Single-use/ single service articles properly stored and used, required	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
B. Single-use/service articles use limitation, kitchenware and tableware preventing contamination	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
38. Gloves used properly	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

### Utensils, Equipment and Vending

	IN	OUT	COS	REPEAT
39A. Food & non-food contact surfaces cleanable	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
B. Food contact surfaces /utensils cleanability, molluscan shellfish tanks, consumer self-service	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
C. Properly designed characteristics: food and non-food contact surfaces, molluscan shellfish tanks	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
40A. Warewashing facilities: installed, maintained, & used; test strips	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
B. Operational warewashing machines	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
41. Non-food contact surfaces clean	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

### Physical Facilities

	IN	OUT	N/O	N/A	COS	REPEAT
42. Hot & cold water available; adequate pressure	<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>
43A. Plumbing installed; proper backflow devices	<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>
B. Prohibiting a cross-connection, non-drinking water, system maintained in good repair	<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>
C. Approved system and cleanable fixtures, service sink	<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>
44A. Sewage and waste water properly disposed	<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>
B. Grease traps easily accessible for cleaning	<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>
45A. Toilet facilities; properly constructed, supplied, & cleaned	<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>
B. Toilet tissue availability	<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>
46. Garbage & refuse properly disposed; facilities maintained	<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>
47A. Physical facilities installed, maintained, & clean	<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>
B. Cleaning maintenance tools, preventing contamination	<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>
48. Adequate ventilation & lighting; designated areas used	<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>

### MASSACHUSETTS ONLY REGULATIONS

Rules and Regulations adopted for use in Massachusetts only.

#### Facilities

	IN	OUT	COS	REPEAT
49A. When plans are reviewed, prerequisite for operations- valid permit	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
B. Contents of plans and specifications, preoperational inspections	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

#### Procedures

	IN	OUT	COS	REPEAT
50. Anti-choking Procedures	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

*Hyle L.*

Inspector

Acknowledged Receipt : Cynthia

Page 4 of 5

## Food Establishment Inspection Report - FDA

Procedures

IN OUT COS REPEAT

51. Tobacco Products: Notice and Sale

☐ ☐ ☐ ☐

*Hyle L.*

Inspector

Acknowledged Receipt : Cynthia

Page 5 of 5



**City of Newton**  
**Health and Human Services**  
 Deborah Youngblood, PhD, Commissioner  
 1000 Commonwealth Ave Newton, MA 02459  
 (617) 796-1420



**Public Health**  
 Prevent. Promote. Protect.

**Food Establishment Inspection Report - FDA**

**Insp Date:** 1/22/2018    **Business ID:** 1N2244  
**Business:** Mason Rice School  
 149 Pleasant St.

Newton, MA 02459

**Inspection:** 6N000013  
**Section:** 2  
**Phone:** 559-9570  
**Inspector:** 1N11123 Nicola Assan  
**Reason:** 1-Routine  
**Results:** No Follow-up R2

**Inspection Summary**

Official Order for Correction: Based on an inspection today, the items checked indicate violations of 105 CMR 590.000/ 2013 Federal Food Code. This report, when signed below by the Commissioner of Health / Agent constitutes an order by the Commissioner of Health. Failure to correct violations cited in this report may result in suspension or revocation of the food establishment permit and cessation of food establishment operations. If aggrieved by this order, you have the right to a hearing. The request must be in writing and submitted to the Commissioner of Health at the above address within 10 days of receipt of this order.

Est. Type 1 - Food Svc Establis License/Permit # 2781 Risk Category 02 Risk Level Observed 02 Low

Foodborne Illness Complaint Investigated (All) ☐ Involving More Than Two Persons ☐

**FOODBORNE ILLNESS RISK FACTORS AND PUBLIC HEALTH INTERVENTIONS**

Compliance status: IN = in compliance OUT = not in compliance N/O = not observed N/A = not applicable

Marked in appropriate box for COS and/or R. COS = corrected on-site during inspection R = repeat violation

Risk factors are improper practices or procedures identified as the most prevalent contributing factors of foodborne illness or injury. Public Health Interventions are control measures to prevent foodborne illnesses or injury.

**Supervision**

1. PIC Present, Knowledge and Duties
2. Certified Food Protection Manager

IN	OUT	N/O	N/A	COS	REPEAT
⊙	○			□	□
○	⊙		○	□	□

***This item has Notes. See Footnote 1 at end of questionnaire.***

**Fail Notes**    2-102.12 (A)    *Certified food protection manager*  
*[The PIC did not have a serve safe certificate. It is important that the PIC demonstrates the required knowledge of food safety through certification and passing an examination that is part of an accredited program.]*

**Employee Health / Responding to Contamination Events**

- 3A. Employee Health: PIC Knowledge, Responsibilities & Reporting
- 3B. Employee Reporting to PIC
4. Proper Use of Restriction & Exclusion

IN	OUT	N/O	N/A	COS	REPEAT
⊙	○			□	□
⊙	○			□	□
⊙	○			□	□

Inspector \_\_\_\_\_

Acknowledged Receipt : \_\_\_\_\_

Page 1 of 7

## Food Establishment Inspection Report - FDA

Employee Health / Responding to Contamination Events		IN	OUT	N/O	N/A	COS	REPEAT
5. Clean-up of Vomiting and Diarrheal Events		⊙	○			□	□
Good Hygienic Practices		IN	OUT	N/O	N/A	COS	REPEAT
6A. Proper eating, tasting, drinking, or tobacco use		⊙	○	○		□	□
6B. Preventing contamination when tasting		⊙	○	○		□	□
7. No discharge from eyes, nose, and mouth		⊙	○	○		□	□
Control of Hands as a Vehicle of Contamination		IN	OUT	N/O	N/A	COS	REPEAT
8A. Hands clean & properly washed		⊙	○	○		□	□
8B. Where to wash, hand antiseptics		○	⊙	○		□	□
Fail Notes	2-301.15 <i>Where to wash</i> <i>[There was pieces of cardboard obstructing the handwashing sink. It is important that handwashing sinks are always accessible for handwashing.]</i>						
9. No bare hand contact with RTE food or a pre-approved alternative procedure properly allowed		⊙	○	○	○	□	□
10A. Adequate handwashing sinks properly supplied and accessible		⊙	○			□	□
10B. Handwashing sinks accesible with proper signage, handwashing aids		⊙	○			□	□
Approved Sources		IN	OUT	N/O	N/A	COS	REPEAT
11A. Milk, eggs, juice, bottled water, hermetically sealed food, game animals		⊙	○	○	○	□	□
11B. Packaged foods, labeling, whole muscle beef		○	○	○	⊙	□	□
11C. Obtaining raw fish, packaged meat & poultry, eggs		○	○	○	⊙	□	□
12A. Food received at proper temperature		○	○	⊙	○	□	□
12B. Shipping and receiving frozen food		○	○	○	⊙	□	□
13. Food in good condition, honestly presented, safe, & unadulterated		⊙	○			□	□
13B. Food package integrity		⊙	○			□	□
14A. Required records available: shellstock tags, parasite destruction		○	○	○	⊙	□	□
14B. Missing shellstock tags, destruction		○	○	○	⊙	□	□
14C. Parasite destruction- storing raw/partially cooked fish		○	○	○	⊙	□	□
Protection from Contamination		IN	OUT	N/O	N/A	COS	REPEAT
15A. Food separated & protected		⊙	○	○	○	□	□
15B. Cleaning equip/utensils/food containers		⊙	○	○	○	□	□
16A. Food-contact surfaces: cleaned & sanitized immersion 171° F and above		○	⊙		○	□	□
Fail Notes	4-501.114 (A-E, F 1&2) <i>Chemical Sanitization - Temperature, pH, Concentration and Hardness</i> <i>[The concentration of sanitizing solution was weak (less than 150ppm). The concentration range for the sanitizing solution should be 150-400ppm as stated in the manufacturers instructions.]</i>						

Inspector \_\_\_\_\_

Acknowledged Receipt : \_\_\_\_\_

Page 2 of 7

## Food Establishment Inspection Report - FDA

### Protection from Contamination

16B. Food contact surfaces cleaned and sanitized NMT 194° F, NLT 180° F

IN OUT N/O N/A COS REPEAT  
☐ ☐ ☒ ☐ ☐

16C. Mechanical warewashing equipment sanitization food contact surfaces, equip., utensils

☐ ☐ ☒ ☐ ☐

17. Proper disposition of returned, previously served reconditions, & unsafe food

☐ ☐ ☐ ☐

### Time/Temperature Control for Safety Food (TCS Food)

18A. Proper cooking time & temperatures

IN OUT N/O N/A COS REPEAT  
☐ ☐ ☐ ☐ ☐ ☐

18B. Whole meat cooking and serving, storing

☐ ☐ ☐ ☒ ☐ ☐

18C. Microwave cooking of raw animal foods

☐ ☐ ☐ ☒ ☐ ☐

19. Proper reheating procedures for hot holding

☒ ☐ ☐ ☐ ☐ ☐

20. Proper cooling time & temperatures

☐ ☐ ☐ ☒ ☐ ☐

21. Proper hot holding temperatures

☐ ☒ ☐ ☐ ☐ ☐

*Fail Notes* | 3-501.16 (A) \*Hot TCS foods Maintained at or Above 135oF, Also for whole meat roasts (130F and above)  
 [The temperature of the food in the hot holding unit was recorded as 117.6 deg F. The minimum hot holding temperature is 135 deg F. The hot holding unit needs to be adjusted so that a temperature of at least 135 deg F is maintained.]

22. Proper cold holding temperatures

☐ ☒ ☐ ☐ ☐ ☐

*Fail Notes* | 3-501.16(A2 &B) \*Cold PHFs Maintained at or Below 41oF- also pertains to untreated eggs (45F)  
 [The temperature of the refrigerator was 45.3 deg F. The cold holding temperature must be maintained at (or below) 41 deg F.]

23. Proper Date Marking

☒ ☐ ☐ ☐ ☐ ☐

23B. TCS Foods Disposition

☒ ☐ ☐ ☐ ☐ ☐

24A. Time as a public health control: procedures

☐ ☐ ☐ ☒ ☐ ☐

24B. Time as a public health control: temperatures & discarding food

☐ ☐ ☐ ☒ ☐ ☐

24C. Time as a public health control: highly susceptible population (HSP)

☐ ☐ ☐ ☒ ☐ ☐

### Consumer Advisory

25. Consumer advisory provided for raw or undercooked foods

IN OUT N/O N/A COS REPEAT  
☐ ☐ ☐ ☒ ☐ ☐

### Highly Susceptible Populations (HSP)

26A. Pasteurized foods used; prohibited foods not offered

IN OUT N/O N/A COS REPEAT  
☐ ☐ ☐ ☒ ☐ ☐

26B. Reservice of foods

☐ ☐ ☐ ☒ ☐ ☐

### Chemical

27. Food additives: approved and properly used

IN OUT N/O N/A COS REPEAT  
☐ ☐ ☐ ☒ ☐ ☐

28A. Toxic substances identified, stored and used

☒ ☐ ☐ ☐ ☐

28B. Poisonous materials, sanitizers, additives, medicines restriction, separation, storage

☒ ☐ ☐ ☐ ☐

Inspector

Acknowledged Receipt :

Page 3 of 7

## Food Establishment Inspection Report - FDA

### Chemical

28C. Conditions of Use: law

IN	OUT	N/O	N/A	COS	REPEAT
<input checked="" type="radio"/>	<input type="radio"/>		<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

### Conformance with Approved Procedures

29A. Compliance with variance, specialized process, & HACCP plan

IN	OUT	N/O	N/A	COS	REPEAT
<input type="radio"/>	<input type="radio"/>		<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

29B. Treating juice- HACCP, reduced oxygen packaging w/out variance, conformance with approved procedures

<input type="radio"/>	<input type="radio"/>		<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
-----------------------	-----------------------	--	----------------------------------	--------------------------	--------------------------

29C. When HACCP plan is required

<input type="radio"/>	<input type="radio"/>		<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
-----------------------	-----------------------	--	----------------------------------	--------------------------	--------------------------

### GOOD RETAIL PRACTICES

Good Retail Practices are preventative measures to control the addition of pathogens, chemicals, and physical objects into foods.

IN = In compliance OUT = not in compliance COS - corrected on -site during inspection REPEAT = repeat violation

### Safe Food and Water

30. Pasteurized eggs used where required

IN	OUT	N/O	N/A	COS	REPEAT
<input type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>

31A. Water & ice from approved source

<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>
----------------------------------	-----------------------	--	--	--------------------------	--------------------------

31B. Sampling, alternative water supply

<input type="radio"/>	<input type="radio"/>		<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
-----------------------	-----------------------	--	----------------------------------	--------------------------	--------------------------

31C. Sampling report

<input type="radio"/>	<input type="radio"/>		<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
-----------------------	-----------------------	--	----------------------------------	--------------------------	--------------------------

32. Variance obtained for specialized processing methods

<input type="radio"/>	<input type="radio"/>		<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
-----------------------	-----------------------	--	----------------------------------	--------------------------	--------------------------

### Food Temperature Control

33A. Proper cooling methods used; adequate equipment for temperature control

IN	OUT	N/O	N/A	COS	REPEAT
<input type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>

33B. Frozen food

<input type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>
-----------------------	-----------------------	--	--	--------------------------	--------------------------

34. Plant food properly cooked for hot holding

<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
-----------------------	-----------------------	-----------------------	----------------------------------	--------------------------	--------------------------

35. Approved thawing methods used

<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
-----------------------	-----------------------	-----------------------	----------------------------------	--------------------------	--------------------------

36A. Thermometers provided and accurate

<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>
----------------------------------	-----------------------	--	--	--------------------------	--------------------------

***This item has Notes. See Footnote 2 at end of questionnaire.***

36B. Thermometers function properly

<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>
----------------------------------	-----------------------	--	--	--------------------------	--------------------------

### Food Identification

37A. Food properly labeled; original container

IN	OUT	COS	REPEAT
<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

37B. Food labels, labeling of ingredients

<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
----------------------------------	-----------------------	--------------------------	--------------------------

### Prevention of Food Contamination

38A. Insects, rodents, & animals not present

<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
----------------------------------	-----------------------	--------------------------	--------------------------

38B. Handling prohibition, controlling pests, prohibiting animals

<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
----------------------------------	-----------------------	--------------------------	--------------------------

39A. Contamination prevented during food storage

<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
----------------------------------	-----------------------	--------------------------	--------------------------

39B. Food display; ice used as an exterior coolant prohibited as an ingredient

<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
----------------------------------	-----------------------	--------------------------	--------------------------

39C. Consumer self-service operations- utensils and monitoring

<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
----------------------------------	-----------------------	--------------------------	--------------------------

40A. Personal cleanliness- prohibition jewelry

<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
----------------------------------	-----------------------	--------------------------	--------------------------

Inspector \_\_\_\_\_

Acknowledged Receipt : \_\_\_\_\_

Page 4 of 7

## Food Establishment Inspection Report - FDA

Prevention of Food Contamination	IN	OUT	COS	REPEAT	
40B. Maintenance of fingernails	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>	
41. Wiping cloths; properly used and stored	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>	
42A. Washing Produce - following chemical manufacturers label	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>	
42B. Washing produce	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>	
42C. Washing produce- chemicals	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Proper Use of Utensils	IN	OUT	COS	REPEAT	
43. In-use utensils; properly stored	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>	
44. Utensils, equipment & linens; properly stored, dried, and handled	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>	
45A. Single-use/ single service articles properly stored and used, required	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>	
45B. Single-use/service articles use limitation, kitchenware and tableware preventing contamination	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>	
46. Gloves used properly	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Utensils, Equipment and Vending	IN	OUT	COS	REPEAT	
47A. Food & non-food contact surfaces cleanable	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>	
47B. Food contact surfaces /utensils cleanability, molluscan shellfish tanks, consumer self-service	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>	
47C. Properly designed characteristics: food and non-food contact surfaces, molluscan shellfish tanks	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>	
48A. Warewashing facilities: installed, maintained, & used; test strips	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>	
48B. Operational warewashing machines	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>	
49. Non-food contact surfaces clean	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Physical Facilities	IN	OUT	N/A	COS	REPEAT
50. Hot & cold water available; adequate pressure	<input checked="" type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>
51A. Plumbing installed; proper backflow devices	<input checked="" type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>
51B. Prohibiting a cross-connection, inspection and servicing system	<input checked="" type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>
51C. Approved system and cleanable fixtures, service sink	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
52A. Sewage and waste water properly disposed	<input checked="" type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>
52B. Grease traps easily accessible for cleaning	<input type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>
52C. Removing mobile food establishment waste	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
53A. Toilet facilities; properly constructed, supplied, & cleaned	<input checked="" type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>
53B. Toilet tissue availability	<input checked="" type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>
54. Garbage & refuse properly disposed; facilities maintained	<input checked="" type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>
55A. Physical facilities installed, maintained, & clean	<input checked="" type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>
55B. Private homes and living or sleeping quarters, use prohibition	<input checked="" type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>
56. Adequate ventilation & lighting; designated areas used	<input checked="" type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>

Inspector \_\_\_\_\_

Acknowledged Receipt : \_\_\_\_\_

## Food Establishment Inspection Report - FDA

### MASSACHUSETTS ONLY REGULATIONS

Rules and Regulations adopted for use in Massachusetts only.

#### Facilities

	IN	OUT	COS	REPEAT
57A. Catering	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
57B. When plans are reviewed, prerequisite for operations- valid permit	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
57C. Contents of plans and specifications, preoperational inspections	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
58. Mobile Food Operations	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
59. Temporary Food Establishments	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
60. Residential Kitchens	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

#### Procedures

	IN	OUT	COS	REPEAT
61. Anti-choking Procedures	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
62. Tobacco Products: Notice and Sale	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
63. Food Allergy Awareness Requirements	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

Inspector \_\_\_\_\_

Acknowledged Receipt : \_\_\_\_\_

Page 6 of 7

## Food Establishment Inspection Report - FDA

### **Footnote 1**

**Notes:**

The PIC informed me that she is due to undertake food safety training in February 2018.

### **Footnote 2**

**Notes:**

There was no sterile wipes available at time of visit. Informed that there will be a delivery of the wipes during the week.



City of Newton  
Health and Human Services  
Deborah Youngblood, PhD, Commissioner  
1000 Commonwealth Ave Newton, MA 02459  
(617) 796-1420



Public Health  
Prevent. Promote. Protect.

Food Establishment Inspection Report - FDA

Insp Date: 10/22/2018 Business ID: 1N2244

Business: Mason Rice School  
149 Pleasant St.

Newton, MA 02459

Inspection: 6N000055

Section: 2

Phone: 559-9570

Inspector: 1N11123 Nicola Assan

Reason: 1-Routine

Results: No Follow-up R2

Inspection Summary

Official Order for Correction: Based on an inspection today, the items checked indicate violations of 105 CMR 590.000/ 2013 Federal Food Code. This report, when signed below by the Commissioner of Health / Agent constitutes an order by the Commissioner of Health. Failure to correct violations cited in this report may result in suspension or revocation of the food establishment permit and cessation of food establishment operations. If aggrieved by this order, you have the right to a hearing. The request must be in writing and submitted to the Commissioner of Health at the above address within 10 days of receipt of this order.

Est. Type 1 - Food Svc Establis License/Permit # 2781 Risk Category 02 Risk Level Observed 02 Low

Foodborne Illness Complaint Investigated (All) ☐ Involving More Than Two Persons ☐

FOODBORNE ILLNESS RISK FACTORS AND PUBLIC HEALTH INTERVENTIONS

Compliance status: IN = in compliance OUT = not in compliance N/O = not observed N/A = not applicable

Marked in appropriate box for COS and/or R. COS = corrected on-site during inspection R = repeat violation

Risk factors are improper practices or procedures identified as the most prevalent contributing factors of foodborne illness or injury. Public Health Interventions are control measures to prevent foodborne illnesses or injury.

Supervision

1. PIC Present, Knowledge and Duties

IN	OUT	N/O	N/A	COS	REPEAT
<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>

2. Certified Food Protection Manager

<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>
----------------------------------	-----------------------	-----------------------	--	--------------------------	--------------------------

Employee Health / Responding to Contamination Events

3A. Employee Health: PIC Knowledge, Responsibilities & Reporting

<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>
----------------------------------	-----------------------	--	--	--------------------------	--------------------------

3B. Employee Reporting to PIC

<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>
----------------------------------	-----------------------	--	--	--------------------------	--------------------------

4. Proper Use of Restriction & Exclusion

<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>
----------------------------------	-----------------------	--	--	--------------------------	--------------------------

5. Clean-up of Vomiting and Diarrheal Events

<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>
----------------------------------	-----------------------	--	--	--------------------------	--------------------------

Good Hygienic Practices

6A. Proper eating, tasting, drinking, or tobacco use

<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>
----------------------------------	-----------------------	-----------------------	--	--------------------------	--------------------------

6B. Preventing contamination when tasting

<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>
----------------------------------	-----------------------	-----------------------	--	--------------------------	--------------------------

Inspector

Acknowledged Receipt : Tim Viveiros

Page 1 of 6

## Food Establishment Inspection Report - FDA

### Good Hygienic Practices

7. No discharge from eyes, nose, and mouth

IN	OUT	N/O	N/A	COS	REPEAT
<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>

### Control of Hands as a Vehicle of Contamination

8A. Hands clean & properly washed

IN	OUT	N/O	N/A	COS	REPEAT
<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>

8B. Where to wash, hand antiseptics

IN	OUT	N/O	N/A	COS	REPEAT
<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>

9. No bare hand contact with RTE food or a pre-approved alternative procedure properly allowed

IN	OUT	N/O	N/A	COS	REPEAT
<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

10A. Adequate handwashing sinks properly supplied and accessible

IN	OUT	N/O	N/A	COS	REPEAT
<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>

10B. Handwashing sinks accessible with proper signage, handwashing aids

IN	OUT	N/O	N/A	COS	REPEAT
<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>

### Approved Sources

11A. Milk, eggs, juice, bottled water, hermetically sealed food, game animals

IN	OUT	N/O	N/A	COS	REPEAT
<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

11B. Packaged foods, labeling, whole muscle beef

IN	OUT	N/O	N/A	COS	REPEAT
<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

11C. Obtaining raw fish, packaged meat & poultry, eggs

IN	OUT	N/O	N/A	COS	REPEAT
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

12A. Food received at proper temperature

IN	OUT	N/O	N/A	COS	REPEAT
<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

12B. Shipping and receiving frozen food

IN	OUT	N/O	N/A	COS	REPEAT
<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

13. Food in good condition, honestly presented, safe, & unadulterated

IN	OUT	N/O	N/A	COS	REPEAT
<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>

13B. Food package integrity

IN	OUT	N/O	N/A	COS	REPEAT
<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>

14A. Required records available: shellstock tags, parasite destruction

IN	OUT	N/O	N/A	COS	REPEAT
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

14B. Missing shellstock tags, destruction

IN	OUT	N/O	N/A	COS	REPEAT
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

14C. Parasite destruction- storing raw/partially cooked fish

IN	OUT	N/O	N/A	COS	REPEAT
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

### Protection from Contamination

15A. Food separated & protected

IN	OUT	N/O	N/A	COS	REPEAT
<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

15B. Cleaning equip/utensils/food containers

IN	OUT	N/O	N/A	COS	REPEAT
<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

16A. Food-contact surfaces: cleaned & sanitized immersion 171° F and above

IN	OUT	N/O	N/A	COS	REPEAT
<input type="radio"/>	<input checked="" type="radio"/>		<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

Fail Notes 4-501.114 (A-E, F 1&2)

*Chemical Sanitization - Temperature, pH, Concentration and Hardness  
[The temperature of the sanitizing solution in the 3 bay compartment sink was 64.4 degrees F. A quaternary ammonium compound solution shall have a minimum temperature of 75 degrees F (24 degrees C). ]*

16B. Food contact surfaces cleaned and sanitized NMT 194° F, NLT 180° F

IN	OUT	N/O	N/A	COS	REPEAT
<input checked="" type="radio"/>	<input type="radio"/>		<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

16C. Mechanical warewashing equipment sanitization food contact surfaces, equip., utensils

IN	OUT	N/O	N/A	COS	REPEAT
<input type="radio"/>	<input type="radio"/>		<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

17. Proper disposition of returned, previously served reconditions, & unsafe food

IN	OUT	N/O	N/A	COS	REPEAT
<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>

### Time/Temperature Control for Safety Food (TCS Food)

18A. Proper cooking time & temperatures

IN	OUT	N/O	N/A	COS	REPEAT
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

18B. Whole meat cooking and serving, storing

IN	OUT	N/O	N/A	COS	REPEAT
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>



Inspector

Acknowledged Receipt : Tim Viveiros

Page 2 of 6

## Food Establishment Inspection Report - FDA

Time/Temperature Control for Safety Food (TCS Food)			IN	OUT	N/O	N/A	COS	REPEAT
18C. Microwave cooking of raw animal foods			<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
19. Proper reheating procedures for hot holding			<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
20. Proper cooling time & temperatures			<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
21. Proper hot holding temperatures			<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
Fail Notes	3-501.16 (A) *Hot TCS foods Maintained at or Above 135oF, Also for whole meat roasts (130F and above) [The temperature of the chicken nuggets in the hot holding unit was 98.6 degrees F. Except during preparation, cooking or cooling or when time is used as the public health control, TCS (time/temperature control for safety food) food shall be maintained at 135 degrees F or above.]							
22. Proper cold holding temperatures			<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
Fail Notes	3-501.16(A2 &B) *Cold PHFs Maintained at or Below 41oF- also pertains to untreated eggs (45F) [The temperature of the cheese sandwiches in the refrigerator ranged from 42 - 44.1 degrees F. In addition, the thermometer in the refrigerator recorded a temperature of 42 degrees F. Maintain the temperature of TCS foods at 41 degrees F or below.]							
23. Proper Date Marking			<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
23B. TCS Foods Disposition			<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
24A. Time as a public health control: procedures			<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
24B. Time as a public health control: temperatures & discarding food			<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
24C. Time as a public health control: highly susceptible population (HSP)			<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
Consumer Advisory			IN	OUT	N/O	N/A	COS	REPEAT
25. Consumer advisory provided for raw or undercooked foods			<input type="radio"/>	<input type="radio"/>		<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
Highly Susceptible Populations (HSP)			IN	OUT	N/O	N/A	COS	REPEAT
26A. Pasteurized foods used; prohibited foods not offered			<input checked="" type="radio"/>	<input type="radio"/>		<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
26B. Reservice of foods			<input checked="" type="radio"/>	<input type="radio"/>		<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
Chemical			IN	OUT	N/O	N/A	COS	REPEAT
27. Food additives: approved and properly used			<input type="radio"/>	<input type="radio"/>		<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
28A. Toxic substances identified, stored and used			<input checked="" type="radio"/>	<input type="radio"/>		<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
28B. Poisonous materials, sanitizers, additives, medicines restriction, separation, storage			<input checked="" type="radio"/>	<input type="radio"/>		<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
28C. Conditions of Use: law			<input checked="" type="radio"/>	<input type="radio"/>		<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
Conformance with Approved Procedures			IN	OUT	N/O	N/A	COS	REPEAT
29A. Compliance with variance, specialized process, & HACCP plan			<input type="radio"/>	<input type="radio"/>		<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
29B. Treating juice- HACCP, reduced oxygen packaging w/out variance, conformance with approved procedures			<input type="radio"/>	<input type="radio"/>		<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>



Inspector

Acknowledged Receipt : Tim Viveiros

Page 3 of 6

## Food Establishment Inspection Report - FDA

Conformance with Approved Procedures

IN OUT N/O N/A COS REPEAT

29C. When HACCP plan is required

☐ ☐ ☒ ☐ ☐

### GOOD RETAIL PRACTICES

Good Retail Practices are preventative measures to control the addition of pathogens, chemicals, and physical objects into foods.

IN = In compliance OUT = not in compliance COS - corrected on -site during inspection REPEAT = repeat violation

#### Safe Food and Water

IN OUT N/O N/A COS REPEAT

30. Pasteurized eggs used where required

☐ ☐ ☐ ☐

31A. Water & ice from approved source

☒ ☐ ☐ ☐

31B. Sampling, alternative water supply

☐ ☐ ☒ ☐ ☐

31C. Sampling report

☐ ☐ ☒ ☐ ☐

32. Variance obtained for specialized processing methods

☐ ☐ ☒ ☐ ☐

#### Food Temperature Control

IN OUT N/O N/A COS REPEAT

33A. Proper cooling methods used; adequate equipment for temperature control

☐ ☐ ☐ ☐

33B. Frozen food

☒ ☐ ☐ ☐

34. Plant food properly cooked for hot holding

☐ ☐ ☒ ☐ ☐

35. Approved thawing methods used

☐ ☐ ☐ ☐ ☐

36A. Thermometers provided and accurate

☒ ☐ ☐ ☐

36B. Thermometers function properly

☒ ☐ ☐ ☐

#### Food Identification

IN OUT COS REPEAT

37A. Food properly labeled; original container

☐ ☒ ☐ ☐

Fail Notes 3-302.12

*Food Storage Containers Identified with Common Name of Food  
[The squeeze bottles containing various condiments were not labeled.  
Containers of food/ingredients that are removed from their original  
packages for use shall be identified with the common name of the food.  
Label all containers and squeeze bottles.]*

37B. Food labels, labeling of ingredients

☒ ☐ ☐ ☐

#### Prevention of Food Contamination

IN OUT COS REPEAT

38A. Insects, rodents, & animals not present

☒ ☐ ☐ ☐

38B. Handling prohibition, controlling pests, prohibiting animals

☒ ☐ ☐ ☐

39A. Contamination prevented during food storage

☒ ☐ ☐ ☐

39B. Food display; ice used as an exterior coolant prohibited as an ingredient

☒ ☐ ☐ ☐

39C. Consumer self-service operations- utensils and monitoring

☒ ☐ ☐ ☐

40A. Personal cleanliness- prohibition jewelry

☒ ☐ ☐ ☐

40B. Maintenance of fingernails

☒ ☐ ☐ ☐

41. Wiping cloths; properly used and stored

☐ ☒ ☐ ☐

*Mason*

Inspector

Acknowledged Receipt : Tim Viveiros

Page 4 of 6

# Food Establishment Inspection Report - FDA

## Prevention of Food Contamination

IN OUT COS REPEAT

### Fail Notes

3-304.14

#### Wiping Cloths, Use Limitation

[A wiping was observed on the food prep table. Wiping cloths in-use for wiping counters and other equipment surfaces shall be held between uses in a chemical sanitizer solution at a concentration specified by the manufacturer (read the label). Wiping cloths used on surfaces in contact with raw animal foods shall be kept separate from cloths used for other purposes. Containers of chemical sanitizing solution in which wet wiping cloths are held between uses shall be stored off the floor and used in a manner that prevents contamination of food, equipment, utensils, linens, and single-service items (to-go containers). If a surface needs to be wiped from crumbs or ingredients (not allergens or raw meats - to remove allergens, soapy water MUST be used) use a disposable towel. Use once and dispose. Avoid using wiping cloths under cutting boards. Instead use a non-slip mat under cutting boards. Soiled wiping cloths, especially when moist, can become breeding grounds for pathogens that could be transferred to food. Wiping cloths soiled with organic material can overcome the effectiveness of, and neutralize, the sanitizer. The sanitizing solution must be changed as needed to minimize the accumulation of organic material and sustain proper concentration. Proper sanitizer concentration should be ensured by checking the solution periodically with an appropriate chemical test kit.]

42A. Washing Produce - following chemical manufacturers label

☐ ☐ ☐ ☐

42B. Washing produce

☒ ☐ ☐ ☐

42C. Washing produce- chemicals

☐ ☐ ☐ ☐

## Proper Use of Utensils

IN OUT COS REPEAT

43. In-use utensils; properly stored

☒ ☐ ☐ ☐

44. Utensils, equipment & linens; properly stored, dried, and handled

☒ ☐ ☐ ☐

45A. Single-use/ single service articles properly stored and used, required

☒ ☐ ☐ ☐

45B. Single-use/service articles use limitation, kitchenware and tableware preventing contamination

☒ ☐ ☐ ☐

46. Gloves used properly

☒ ☐ ☐ ☐

## Utensils, Equipment and Vending

IN OUT COS REPEAT

47A. Food & non-food contact surfaces cleanable

☒ ☐ ☐ ☐

47B. Food contact surfaces /utensils cleanability, molluscan shellfish tanks, consumer self-service

☒ ☐ ☐ ☐

47C. Properly designed characteristics: food and non-food contact surfaces, molluscan shellfish tanks

☒ ☐ ☐ ☐

48A. Warewashing facilities: installed, maintained, & used; test strips

☐ ☒ ☐ ☐

### Fail Notes

4-501.19

#### Manual warewashing equipment, wash solution temperature

[The temperature of the wash solution in the 3 bay compartment sink was 71.6 degrees F (22 degrees C). The wash solution temperature required in the Food Code is essential for the removal of organic matter. If the temperature is below 110 degrees F (43.3 degrees C), the performance of the detergent may be adversely affected, for example, animal fats that may be present on the dirty dishes would not be dissolved.]



Inspector

Acknowledged Receipt : Tim Viveiros

Page 5 of 6

## Food Establishment Inspection Report - FDA

### Utensils, Equipment and Vending

	IN	OUT	COS	REPEAT
48B. Operational warewashing machines	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
49. Non-food contact surfaces clean	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

### Physical Facilities

	IN	OUT	N/A	COS	REPEAT
50. Hot & cold water available; adequate pressure	<input checked="" type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>
51A. Plumbing installed; proper backflow devices	<input type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>
51B. Prohibiting a cross-connection, inspection and servicing system	<input type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>
51C. Approved system and cleanable fixtures, service sink	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
52A. Sewage and waste water properly disposed	<input checked="" type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>
52B. Grease traps easily accessible for cleaning	<input type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>
52C. Removing mobile food establishment waste	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
53A. Toilet facilities; properly constructed, supplied, & cleaned	<input checked="" type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>
53B. Toilet tissue availability	<input checked="" type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>
54. Garbage & refuse properly disposed; facilities maintained	<input checked="" type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>
55A. Physical facilities installed, maintained, & clean	<input checked="" type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>
55B. Private homes and living or sleeping quarters, use prohibition	<input checked="" type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>
56. Adequate ventilation & lighting; designated areas used	<input checked="" type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>

### MASSACHUSETTS ONLY REGULATIONS

Rules and Regulations adopted for use in Massachusetts only.

#### Facilities

	IN	OUT	COS	REPEAT
57A. Catering	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
57B. When plans are reviewed, prerequisite for operations- valid permit	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
57C. Contents of plans and specifications, preoperational inspections	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
58. Mobile Food Operations	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
59. Temporary Food Establishments	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
60. Residential Kitchens	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

#### Procedures

	IN	OUT	COS	REPEAT
61. Anti-choking Procedures	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
62. Tobacco Products: Notice and Sale	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
63. Food Allergy Awareness Requirements	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>



Inspector

Acknowledged Receipt : Tim Viveiros

Page 6 of 6



City of Newton  
Health and Human Services  
Deborah Youngblood, PhD, Commissioner  
1000 Commonwealth Ave Newton, MA 02459  
(617) 796-1420



Public Health  
Prevent, Promote, Protect

Food Establishment Inspection Report - FDA

Insp Date: 5/6/2019  
Business: Mason Rice School  
149 Pleasant St.

Business ID: 1N2244

Newton, MA 02459

Inspection: 6N000115

Section: 2

Phone: 559-9570

Inspector: 1N11123 Nicola Assan

Reason: 1-Routine

Results: No Follow-up R2

Inspection Summary

Official Order for Correction: Based on an inspection today, the items checked indicate violations of 105 CMR 590.000/ 2013 Federal Food Code. This report, when signed below by the Commissioner of Health / Agent constitutes an order by the Commissioner of Health. Failure to correct violations cited in this report may result in suspension or revocation of the food establishment permit and cessation of food establishment operations. If aggrieved by this order, you have the right to a hearing. The request must be in writing and submitted to the Commissioner of Health at the above address within 10 days of receipt of this order.

Est. Type 1 - Food Svc Establis License/Permit # 2781 Risk Category 02 Risk Level Observed 02 Low

Foodborne Illness Complaint Investigated (All) ☐ Involving More Than Two Persons ☐

FOODBORNE ILLNESS RISK FACTORS AND PUBLIC HEALTH INTERVENTIONS

Compliance status: IN = in compliance OUT = not in compliance N/O = not observed N/A = not applicable

Marked in appropriate box for COS and/or R. COS = corrected on-site during inspection R = repeat violation

Risk factors are improper practices or procedures identified as the most prevalent contributing factors of foodborne illness or injury. Public Health Interventions are control measures to prevent foodborne illnesses or injury.

Supervision

1. PIC Present, Knowledge and Duties

IN	OUT	N/O	N/A	COS	REPEAT
<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>

2. Certified Food Protection Manager

<input checked="" type="radio"/>	<input type="radio"/>		<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
----------------------------------	-----------------------	--	-----------------------	--------------------------	--------------------------

Employee Health / Responding to Contamination Events

3A. Employee Health: PIC Knowledge, Responsibilities & Reporting

<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>
----------------------------------	-----------------------	--	--	--------------------------	--------------------------

3B. Employee Reporting to PIC

<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>
----------------------------------	-----------------------	--	--	--------------------------	--------------------------

4. Proper Use of Restriction & Exclusion

<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>
----------------------------------	-----------------------	--	--	--------------------------	--------------------------

5. Clean-up of Vomiting and Diarrheal Events

<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>
----------------------------------	-----------------------	--	--	--------------------------	--------------------------

Good Hygienic Practices

6A. Proper eating, tasting, drinking, or tobacco use

<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>
----------------------------------	-----------------------	-----------------------	--	--------------------------	--------------------------

6B. Preventing contamination when tasting

<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>
----------------------------------	-----------------------	-----------------------	--	--------------------------	--------------------------

Inspector

Acknowledged Receipt : Tim Viveiros

Page 1 of 7

## Food Establishment Inspection Report - FDA

### Good Hygienic Practices

7. No discharge from eyes, nose, and mouth

IN	OUT	N/O	N/A	COS	REPEAT
<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>

### Control of Hands as a Vehicle of Contamination

8A. Hands clean & properly washed

IN	OUT	N/O	N/A	COS	REPEAT
<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>

8B. Where to wash, hand antiseptics

IN	OUT	N/O	N/A	COS	REPEAT
<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>

9. No bare hand contact with RTE food or a pre-approved alternative procedure properly allowed

IN	OUT	N/O	N/A	COS	REPEAT
<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

10A. Adequate handwashing sinks properly supplied and accessible

IN	OUT	N/O	N/A	COS	REPEAT
<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>

10B. Handwashing sinks accesible with proper signage, handwashing aids

IN	OUT	N/O	N/A	COS	REPEAT
<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>

### Approved Sources

11A. Milk, eggs, juice, bottled water, hermetically sealed food, game animals

IN	OUT	N/O	N/A	COS	REPEAT
<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

11B. Packaged foods, labeling, whole muscle beef

IN	OUT	N/O	N/A	COS	REPEAT
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

11C. Obtaining raw fish, packaged meat & poultry, eggs

IN	OUT	N/O	N/A	COS	REPEAT
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

12A. Food received at proper temperature

IN	OUT	N/O	N/A	COS	REPEAT
<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

12B. Shipping and receiving frozen food

IN	OUT	N/O	N/A	COS	REPEAT
<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

13. Food in good condition, honestly presented, safe, & unadulterated

IN	OUT	N/O	N/A	COS	REPEAT
<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>

13B. Food package integrity

IN	OUT	N/O	N/A	COS	REPEAT
<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>

14A. Required records available: shellstock tags, parasite destruction

IN	OUT	N/O	N/A	COS	REPEAT
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

14B. Missing shellstock tags, destruction

IN	OUT	N/O	N/A	COS	REPEAT
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

14C. Parasite destruction- storing raw/partially cooked fish

IN	OUT	N/O	N/A	COS	REPEAT
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

### Protection from Contamination

15A. Food separated & protected

IN	OUT	N/O	N/A	COS	REPEAT
<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

15B. Cleaning equip/utensils/food containers

IN	OUT	N/O	N/A	COS	REPEAT
<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

16A. Food-contact surfaces: cleaned & sanitized immersion 171° F and above

IN	OUT	N/O	N/A	COS	REPEAT
<input type="radio"/>	<input checked="" type="radio"/>		<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

Fail Notes 4-501.114 (A-E, F 1&2)

*Chemical Sanitization - Temperature, pH, Concentration and Hardness  
[The concentration of the sanitizing solution in the 3 bay sink compartment was too strong (>500ppm). The quaternary compound solution shall have a concentration as indicated on the manufacturer's use directions included in the labeling. In addition, a quaternary compound solution shall have a minimum temperature range of 65 to 75 degrees F.]*

16B. Food contact surfaces cleaned and sanitized NMT 194° F, NLT 180° F

IN	OUT	N/O	N/A	COS	REPEAT
<input checked="" type="radio"/>	<input type="radio"/>		<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

16C. Mechanical warewashing equipment sanitization food contact surfaces, equip., utensils

IN	OUT	N/O	N/A	COS	REPEAT
<input checked="" type="radio"/>	<input type="radio"/>		<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

17. Proper disposition of returned, previously served reconditions, & unsafe food

IN	OUT	N/O	N/A	COS	REPEAT
<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>

### Time/Temperature Control for Safety Food (TCS Food)

IN	OUT	N/O	N/A	COS	REPEAT
----	-----	-----	-----	-----	--------

*Asson*

Inspector

Acknowledged Receipt : Tim Viveiros

Page 2 of 7

## Food Establishment Inspection Report - FDA

Time/Temperature Control for Safety Food (TCS Food)	IN	OUT	N/O	N/A	COS	REPEAT
18A. Proper cooking time & temperatures	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
18B. Whole meat cooking and serving, storing	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
18C. Microwave cooking of raw animal foods	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
19. Proper reheating procedures for hot holding	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
20. Proper cooling time & temperatures	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
21. Proper hot holding temperatures	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

**This item has Notes. See Footnote 1 at end of questionnaire.**

Fail Notes | 3-501.16 (A) \*Hot TCS foods Maintained at or Above 135oF, Also for whole meat roasts (130F and above)  
[The temperature of the chicken nuggets in the hot holding unit ranged from 101.1 to 105.8 degrees F. The temperature of TCS (time/temperature control for safety) foods shall be maintained at 135 degrees F or above.]

22. Proper cold holding temperatures	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
23. Proper Date Marking	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
23B. TCS Foods Disposition	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
24A. Time as a public health control: procedures	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
24B. Time as a public health control: temperatures & discarding food	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
24C. Time as a public health control: highly susceptible population (HSP)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

Consumer Advisory	IN	OUT	N/O	N/A	COS	REPEAT
25. Consumer advisory provided for raw or undercooked foods	<input type="radio"/>	<input type="radio"/>		<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

Highly Susceptible Populations (HSP)	IN	OUT	N/O	N/A	COS	REPEAT
26A. Pasteurized foods used; prohibited foods not offered	<input type="radio"/>	<input type="radio"/>		<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
26B. Reservice of foods	<input type="radio"/>	<input type="radio"/>		<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

Chemical	IN	OUT	N/O	N/A	COS	REPEAT
27. Food additives: approved and properly used	<input type="radio"/>	<input type="radio"/>		<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
28A. Toxic substances identified, stored and used	<input checked="" type="radio"/>	<input type="radio"/>		<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
28B. Poisonous materials, sanitizers, additives, medicines restriction, separation, storage	<input checked="" type="radio"/>	<input type="radio"/>		<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
28C. Conditions of Use: law	<input checked="" type="radio"/>	<input type="radio"/>		<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

Conformance with Approved Procedures	IN	OUT	N/O	N/A	COS	REPEAT
29A. Compliance with variance, specialized process, & HACCP plan	<input type="radio"/>	<input type="radio"/>		<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
29B. Treating juice- HACCP, reduced oxygen packaging w/out variance, conformance with approved procedures	<input type="radio"/>	<input type="radio"/>		<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
29C. When HACCP plan is required	<input type="radio"/>	<input type="radio"/>		<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

*Asson*

Inspector

Acknowledged Receipt : Tim Viveiros

Page 3 of 7

## Food Establishment Inspection Report - FDA

### GOOD RETAIL PRACTICES

Good Retail Practices are preventative measures to control the addition of pathogens, chemicals, and physical objects into foods.

IN = In compliance    OUT = not in compliance    COS - corrected on -site during inspection    REPEAT = repeat violation

#### Safe Food and Water

	IN	OUT	N/O	N/A	COS	REPEAT
30. Pasteurized eggs used where required	<input type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>
31A. Water & ice from approved source	<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>
31B. Sampling, alternative water supply	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>
31C. Sampling report	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>
32. Variance obtained for specialized processing methods	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>

#### Food Temperature Control

	IN	OUT	N/O	N/A	COS	REPEAT
33A. Proper cooling methods used; adequate equipment for temperature control	<input type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>
33B. Frozen food	<input type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>
34. Plant food properly cooked for hot holding	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
35. Approved thawing methods used	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
36A. Thermometers provided and accurate	<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>
36B. Thermometers function properly	<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>

#### Food Identification

	IN	OUT	COS	REPEAT
37A. Food properly labeled; original container	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
37B. Food labels, labeling of ingredients	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

#### Prevention of Food Contamination

	IN	OUT	COS	REPEAT
38A. Insects, rodents, & animals not present	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
38B. Handling prohibition, controlling pests, prohibiting animals	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
39A. Contamination prevented during food storage	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
39B. Food display; ice used as an exterior coolant prohibited as an ingredient	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
39C. Consumer self-service operations- utensils and monitoring	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
40A. Personal cleanliness- prohibition jewelry	<input type="radio"/>	<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

Fail Notes    2-303.11

*Prohibition-Jewelry*

*[The PIC was observed wearing a bracelet and a wrist watch. Except for a plain ring such as a wedding band, while preparing food, food employees may not wear jewelry including medical information jewelry on their arms and hands.]*

40B. Maintenance of fingernails	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
41. Wiping cloths; properly used and stored	<input type="radio"/>	<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

*Asson*

Inspector

Acknowledged Receipt : Tim Viveiros

Page 4 of 7

# Food Establishment Inspection Report - FDA

## Prevention of Food Contamination

IN OUT COS REPEAT

### Fail Notes

3-304.14

### Wiping Cloths, Use Limitation

[Wiping cloths were observed being stored on the food preparation table. Wiping cloths in-use for wiping counters and other equipment surfaces shall be held between uses in a chemical solution at a concentration specified by the manufacturer (read the label). Wiping cloths used for surfaces in contact with raw animal foods shall be kept separate from cloths used for other purposes. Containers of chemical sanitizing solution in which wet wiping cloths are held between uses shall be stored off the floor and used in a manner that prevents contamination of food, equipment, utensils, linens and single-service items (to-go containers). If a surface needs to be wiped down from crumbs or ingredients (not allergens or raw meats - to remove allergens, soapy water MUST be used) use a disposable paper towel. Use once and dispose. Avoid using wiping cloths under cutting boards and to cover foods. Instead use a non-slip mat under the cutting boards. Using a paper towel is acceptable to use to cover food, however, plastic wrap is recommended.]

42A. Washing Produce - following chemical manufacturers label

☐ ☐ ☐ ☐

42B. Washing produce

☒ ☐ ☐ ☐

42C. Washing produce- chemicals

☐ ☐ ☐ ☐

## Proper Use of Utensils

IN OUT COS REPEAT

43. In-use utensils; properly stored

☒ ☐ ☐ ☐

44. Utensils, equipment & linens; properly stored, dried, and handled

☒ ☐ ☐ ☐

45A. Single-use/ single service articles properly stored and used, required

☒ ☐ ☐ ☐

45B. Single-use/service articles use limitation, kitchenware and tableware preventing contamination

☒ ☐ ☐ ☐

46. Gloves used properly

☒ ☐ ☐ ☐

## Utensils, Equipment and Vending

IN OUT COS REPEAT

47A. Food & non-food contact surfaces cleanable

☒ ☐ ☐ ☐

47B. Food contact surfaces /utensils cleanability, molluscan shellfish tanks, consumer self-service

☒ ☐ ☐ ☐

47C. Properly designed characteristics: food and non-food contact surfaces, molluscan shellfish tanks

☒ ☐ ☐ ☐

48A. Warewashing facilities: installed, maintained, & used; test strips

☒ ☐ ☐ ☐

48B. Operational warewashing machines

☒ ☐ ☐ ☐

49. Non-food contact surfaces clean

☒ ☐ ☐ ☐

## Physical Facilities

IN OUT N/A COS REPEAT

50. Hot & cold water available; adequate pressure

☒ ☐ ☐ ☐

51A. Plumbing installed; proper backflow devices

☒ ☐ ☐ ☐

51B. Prohibiting a cross-connection, inspection and servicing system

☒ ☐ ☐ ☐

51C. Approved system and cleanable fixtures, service sink

☒ ☐ ☐ ☐ ☐

52A. Sewage and waste water properly disposed

☒ ☐ ☐ ☐

*Assan*

Inspector

Acknowledged Receipt : Tim Viveiros

Page 5 of 7

## Food Establishment Inspection Report - FDA

### Physical Facilities

	IN	OUT	N/A	COS	REPEAT
52B. Grease traps easily accessible for cleaning	<input checked="" type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>
52C. Removing mobile food establishment waste	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
53A. Toilet facilities; properly constructed, supplied, & cleaned	<input checked="" type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>
53B. Toilet tissue availability	<input checked="" type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>
54. Garbage & refuse properly disposed; facilities maintained	<input checked="" type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>
55A. Physical facilities installed, maintained, & clean	<input checked="" type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>
55B. Private homes and living or sleeping quarters, use prohibition	<input checked="" type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>
56. Adequate ventilation & lighting; designated areas used	<input checked="" type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>

### MASSACHUSETTS ONLY REGULATIONS

Rules and Regulations adopted for use in Massachusetts only.

### Facilities

	IN	OUT	COS	REPEAT
57A. Catering	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
57B. When plans are reviewed, prerequisite for operations- valid permit	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
57C. Contents of plans and specifications, preoperational inspections	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
58. Mobile Food Operations	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
59. Temporary Food Establishments	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
60. Residential Kitchens	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

### Procedures

	IN	OUT	COS	REPEAT
61. Anti-choking Procedures	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
62. Tobacco Products: Notice and Sale	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
63. Food Allergy Awareness Requirements	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

*Asson*

Inspector

Acknowledged Receipt : Tim Viveiros

Page 6 of 7

## Food Establishment Inspection Report - FDA

### Footnote 1

#### **Notes:**

The temperature of the chicken nuggets in the hot holding unit ranged from 101.1 to 105.8 degrees F. The PIC had just switched on the unit so it had not reached the required temperature which is why the temperature of the nuggets were below the required 135 degrees F.

Please ensure that the hot holding unit is hot enough before placing food in it so that a temperature of 135 degrees F is maintained (for TCS food).



Inspector

Acknowledged Receipt : Tim Viveiros

Page 7 of 7



**City of Newton**  
**Health and Human Services**  
 Deborah Youngblood, PhD, Commissioner  
 1000 Commonwealth Ave Newton, MA 02459  
 (617) 796-1420



**Public Health**  
 Prevent. Promote. Protect.

**Food Establishment Inspection Report - FDA**

**Insp Date:** 4/10/2017    **Business ID:** 1N2249  
**Business:** Memorial Spaulding School  
 250 Brookline St.

Newton, MA 02459

**Inspection:** 5N000297  
**Section:** 2  
**Phone:** 617-559-9600  
**Inspector:** 1N81219 Kyle Simpson  
**Reason:** 1-Routine  
**Results:** No Follow-up

**Inspection Summary**

Official Order for Correction: Based on an inspection today, the items checked indicate violations of 105 CMR 590.000/ 2009 Federal Food Code. This report, when signed below by the Commissioner of Health / Agent constitutes an order by the Commissioner of Health. Failure to correct violations cited in this report may result in suspension or revocation of the food establishment permit and cessation of food establishment operations. If aggrieved by this order, you have the right to a hearing. The request must be in writing and submitted to the Commissioner of Health at the above address within 10 days of receipt of this order.

Est. Type 1 - Food Svc Establis License/Permit # \_\_\_\_\_ Risk Category 02 Risk Level Observed 02 Low

**FOODBORNE ILLNESS RISK FACTORS AND PUBLIC HEALTH INTERVENTIONS**

Compliance status: IN = in compliance OUT = not in compliance N/O = not observed N/A = not applicable

Marked in appropriate box for COS and/or R. COS = corrected on-site during inspection R = repeat violation

Risk factors are improper practices or procedures identified as the most prevalent contributing factors of foodborne illness or injury. Public Health Interventions are control measures to prevent foodborne illnesses or injury.

**Supervision**

1A. PIC Present

IN	OUT	N/O	N/A	COS	REPEAT
<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>

B. Cert. food manager, knowledge, no critical violations

<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>
----------------------------------	-----------------------	--	--	--------------------------	--------------------------

C. Duties of PIC

<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>
----------------------------------	-----------------------	--	--	--------------------------	--------------------------

**Employee Health**

2. Management, food employee and conditional employee; knowledge, responsibilities and reporting

IN	OUT	N/O	N/A	COS	REPEAT
<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

3. Proper use of restriction and exclusion

<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>
----------------------------------	-----------------------	--	--	--------------------------	--------------------------

**Good Hygienic Practices**

4A. Proper eating, tasting, drinking, or tobacco use

IN	OUT	N/O	N/A	COS	REPEAT
<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>

B. Preventing contamination when tasting

<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>
-----------------------	-----------------------	----------------------------------	--	--------------------------	--------------------------

5. No discharge from eyes, nose, and mouth

<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>
----------------------------------	-----------------------	-----------------------	--	--------------------------	--------------------------

*Kyle Simpson*  
 Inspector

Acknowledged Receipt :

## Food Establishment Inspection Report - FDA

### Preventing Contamination by Hands

6A. Hands clean & properly washed

B. Where to wash, hand antiseptics

7. No bare hand contact with RTE food or a pre-approved alternative procedure properly allowed

8A. Adequate handwashing sinks properly supplied and accessible

B. Handwashing sinks accessible with proper signage, handwashing aids

C. Conveniently located handwashing sink

### Approved Sources

9A. Milk, eggs, juice, bottled water, hermetically sealed food

B. Fish and shellfish

10. Food received at proper temperature

11. Food in good condition, safe, & unadulterated

### Protection from Contamination

12A. Food separated & protected

B. Gloves, use limitation, one task- contaminated

13A. Food-contact surfaces: cleaned & sanitized 171° F

B. Food contact surfaces cleaned and sanitized NMT 194° F, NLT 180° F

C. Mechanical warewashing equipment sanitization food contact surfaces, equip., utensils

14. Proper disposition of returned, previously served reconditions, & unsafe food

### Potentially Hazardous Food Time/Temperature

15. Proper cooking time & temperatures

16. Proper reheating procedures for hot holding

17. Proper cooling time & temperatures

18. Proper hot holding temperatures

19. Proper cold holding temperatures

20. Time as a public health control: procedures & record

### Highly Susceptible Populations

21. Pasteurized foods used; prohibited foods not offered

### Chemical

22. Food additives: approved and properly used

23A. Toxic substances properly identified, stored and used

B. Restriction presence and use, restriction and storage of medicines

IN OUT N/O N/A COS REPEAT

⊙ ○ ○ □ □

⊙ ○ ○ □ □

⊙ ○ ○ ○ □ □

⊙ ○ □ □

⊙ ○ □ □

⊙ ○ □ □

IN OUT N/O N/A COS REPEAT

⊙ ○ □ □

○ ○ ○ ⊙ □ □

○ ○ ⊙ ○ □ □

⊙ ○ □ □

IN OUT N/O N/A COS REPEAT

⊙ ○ ○ ○ □ □

⊙ ○ ○ ○ □ □

⊙ ○ ○ □ □

⊙ ○ ○ □ □

⊙ ○ ○ □ □

⊙ ○ □ □

IN OUT N/O N/A COS REPEAT

⊙ ○ ○ ○ □ □

⊙ ○ ○ ○ □ □

○ ○ ○ ⊙ □ □

⊙ ○ ○ ○ □ □

⊙ ○ ○ ○ □ □

○ ○ ○ ⊙ □ □

IN OUT N/O N/A COS REPEAT

○ ○ ⊙ □ □

IN OUT N/O N/A COS REPEAT

○ ○ ⊙ □ □

⊙ ○ ○ □ □

⊙ ○ ○ □ □

*Kyle L.*

Inspector

Acknowledged Receipt :

Page 2 of 4

## Food Establishment Inspection Report - FDA

Chemical

IN OUT N/O N/A COS REPEAT

C. Storage- other personal care items

☒ ☐ ☐ ☐ ☐

### GOOD RETAIL PRACTICES

Good Retail Practices are preventative measures to control the addition of pathogens, chemicals, and physical objects into foods.

IN = In compliance OUT = not in compliance COS - corrected on -site during inspection REPEAT = repeat violation

#### Safe Food and Water

IN OUT N/O N/A COS REPEAT

24. Water & ice from approved source

☒ ☐ ☐ ☐ ☐ ☐

#### Food Temperature Control

IN OUT N/O N/A COS REPEAT

25A. Proper cooling methods used; adequate equipment for temperature control

☒ ☐ ☐ ☐ ☐ ☐

B. Frozen food

☒ ☐ ☐ ☐ ☐ ☐

26. Plant food properly cooked for hot holding

☐ ☐ ☐ ☒ ☐ ☐

27. Approved thawing methods used

☐ ☐ ☐ ☒ ☐ ☐

28A. Thermometers provided and accurate

☒ ☐ ☐ ☐ ☐ ☐

B. Thermometers function properly

☒ ☐ ☐ ☐ ☐ ☐

#### Food Identification

IN OUT COS REPEAT

29A. Food properly labeled; original container

☒ ☐ ☐ ☐

B. Food labels, labeling of ingredients

☒ ☐ ☐ ☐

#### Prevention of Food Contamination

IN OUT COS REPEAT

30A. Insects, rodents, & animals not present

☒ ☐ ☐ ☐

B. Handling prohibition, controlling pests, prohibiting animals

☒ ☐ ☐ ☐

31A. Contamination prevented during food storage

☒ ☐ ☐ ☐

B. Food display; ice used as an exterior coolant prohibited as an ingredient

☒ ☐ ☐ ☐

C. Consumer self-service operations- utensils and monitoring

☒ ☐ ☐ ☐

32A. Personal cleanliness- prohibition jewelry

☒ ☐ ☐ ☐

B. Maintenance of fingernails

☒ ☐ ☐ ☐

33. Wiping cloths; properly used and stored

☒ ☐ ☐ ☐

34. Washing fruits & vegetables

☒ ☐ ☐ ☐

#### Proper Use of Utensils

IN OUT COS REPEAT

35. In-use utensils; properly stored

☒ ☐ ☐ ☐

36. Utensils, equipment & linens; properly stored, dried, and handled

☒ ☐ ☐ ☐

37A. Single-use/ single service articles properly stored and used, required

☒ ☐ ☐ ☐

B. Single-use/service articles use limitation, kitchenware and tableware preventing contamination

☒ ☐ ☐ ☐

38. Gloves used properly

☒ ☐ ☐ ☐



Inspector

Acknowledged Receipt :

Page 3 of 4

## Food Establishment Inspection Report - FDA

### Utensils, Equipment and Vending

	IN	OUT	COS	REPEAT
39A. Food & non-food contact surfaces cleanable	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
B. Food contact surfaces /utensils cleanability, molluscan shellfish tanks, consumer self-servic	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
C. Properly designed characteristics: food and non-food contact surfaces, molluscan shellfish tanks	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
40A. Warewashing facilities: installed, maintained, & used; test strips	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
B. Operational warewashing machines	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
41. Non-food contact surfaces clean	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

### Physical Facilities

	IN	OUT	N/O	N/A	COS	REPEAT
42. Hot & cold water available; adequate pressure	<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>
43A. Plumbing installed; proper backflow devices	<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>
B. Prohibiting a cross-connection, non-drinking water, system maintained in good repair	<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>
C. Approved system and cleanable fixtures, service sink	<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>
44A. Sewage and waste water properly disposed	<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>
B. Grease traps easily accessible for cleaning	<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>
45A. Toilet facilities; properly constructed, supplied, & cleaned	<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>
B. Toilet tissue availability	<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>
46. Garbage & refuse properly disposed; facilities maintained	<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>
47A. Physical facilities installed, maintained, & clean	<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>
B. Cleaning maintenance tools, preventing contamination	<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>
48. Adequate ventilation & lighting; designated areas used	<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>

### MASSACHUSETTS ONLY REGULATIONS

Rules and Regulations adopted for use in Massachusetts only.

#### Facilities

	IN	OUT	COS	REPEAT
49A. When plans are reviewed, prerequisite for operations- valid permit	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
B. Contents of plans and specifications, preoperational inspections	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

#### Procedures

	IN	OUT	COS	REPEAT
50. Anti-choking Procedures	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
51. Tobacco Products: Notice and Sale	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>



Inspector

Acknowledged Receipt :

Page 4 of 4



City of Newton  
Health and Human Services  
Deborah Youngblood, PhD, Commissioner  
1000 Commonwealth Ave Newton, MA 02459  
(617) 796-1420



Public Health  
Prevent. Promote. Protect.

Food Establishment Inspection Report - FDA

Insp Date: 1/26/2018 Business ID: 1N2249  
Business: Memorial Spaulding School  
250 Brookline St.

Newton, MA 02459

Inspection: 6N000015  
Section: 2  
Phone: 617-559-9600  
Inspector: 1N11123 Nicola Assan  
Reason: 1-Routine  
Results: No Follow-up R2

Inspection Summary

Official Order for Correction: Based on an inspection today, the items checked indicate violations of 105 CMR 590.000/ 2013 Federal Food Code. This report, when signed below by the Commissioner of Health / Agent constitutes an order by the Commissioner of Health. Failure to correct violations cited in this report may result in suspension or revocation of the food establishment permit and cessation of food establishment operations. If aggrieved by this order, you have the right to a hearing. The request must be in writing and submitted to the Commissioner of Health at the above address within 10 days of receipt of this order.

Est. Type 1 - Food Svc Establis License/Permit # \_\_\_\_\_ Risk Category 02 Risk Level Observed 02 Low

Foodborne Illness Complaint Investigated (All) ☐ Involving More Than Two Persons ☐

FOODBORNE ILLNESS RISK FACTORS AND PUBLIC HEALTH INTERVENTIONS

Compliance status: IN = in compliance OUT = not in compliance N/O = not observed N/A = not applicable

Marked in appropriate box for COS and/or R. COS = corrected on-site during inspection R = repeat violation

Risk factors are improper practices or procedures identified as the most prevalent contributing factors of foodborne illness or injury. Public Health Interventions are control measures to prevent foodborne illnesses or injury.

Supervision

1. PIC Present, Knowledge and Duties

IN	OUT	N/O	N/A	COS	REPEAT
<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>

2. Certified Food Protection Manager

<input checked="" type="radio"/>	<input type="radio"/>		<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
----------------------------------	-----------------------	--	-----------------------	--------------------------	--------------------------

Employee Health / Responding to Contamination Events

3A. Employee Health: PIC Knowledge, Responsibilities & Reporting

IN	OUT	N/O	N/A	COS	REPEAT
<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>

3B. Employee Reporting to PIC

<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>
----------------------------------	-----------------------	--	--	--------------------------	--------------------------

4. Proper Use of Restriction & Exclusion

<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>
----------------------------------	-----------------------	--	--	--------------------------	--------------------------

5. Clean-up of Vomiting and Diarrheal Events

<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>
----------------------------------	-----------------------	--	--	--------------------------	--------------------------

Good Hygienic Practices

6A. Proper eating, tasting, drinking, or tobacco use

IN	OUT	N/O	N/A	COS	REPEAT
<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>

6B. Preventing contamination when tasting

<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>
----------------------------------	-----------------------	-----------------------	--	--------------------------	--------------------------

Inspector \_\_\_\_\_

Acknowledged Receipt : \_\_\_\_\_

Page 1 of 6

## Food Establishment Inspection Report - FDA

### Good Hygienic Practices

7. No discharge from eyes, nose, and mouth

IN	OUT	N/O	N/A	COS	REPEAT
<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>

### Control of Hands as a Vehicle of Contamination

8A. Hands clean & properly washed

IN	OUT	N/O	N/A	COS	REPEAT
<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>

8B. Where to wash, hand antiseptics

IN	OUT	N/O	N/A	COS	REPEAT
<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>

9. No bare hand contact with RTE food or a pre-approved alternative procedure properly allowed

IN	OUT	N/O	N/A	COS	REPEAT
<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

10A. Adequate handwashing sinks properly supplied and accessible

IN	OUT	N/O	N/A	COS	REPEAT
<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>

10B. Handwashing sinks accessible with proper signage, handwashing aids

IN	OUT	N/O	N/A	COS	REPEAT
<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>

### Approved Sources

11A. Milk, eggs, juice, bottled water, hermetically sealed food, game animals

IN	OUT	N/O	N/A	COS	REPEAT
<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

11B. Packaged foods, labeling, whole muscle beef

IN	OUT	N/O	N/A	COS	REPEAT
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

11C. Obtaining raw fish, packaged meat & poultry, eggs

IN	OUT	N/O	N/A	COS	REPEAT
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

12A. Food received at proper temperature

IN	OUT	N/O	N/A	COS	REPEAT
<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

12B. Shipping and receiving frozen food

IN	OUT	N/O	N/A	COS	REPEAT
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

13. Food in good condition, honestly presented, safe, & unadulterated

IN	OUT	N/O	N/A	COS	REPEAT
<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>

13B. Food package integrity

IN	OUT	N/O	N/A	COS	REPEAT
<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>

14A. Required records available: shellstock tags, parasite destruction

IN	OUT	N/O	N/A	COS	REPEAT
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

14B. Missing shellstock tags, destruction

IN	OUT	N/O	N/A	COS	REPEAT
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

14C. Parasite destruction- storing raw/partially cooked fish

IN	OUT	N/O	N/A	COS	REPEAT
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

### Protection from Contamination

15A. Food separated & protected

IN	OUT	N/O	N/A	COS	REPEAT
<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

15B. Cleaning equip/utensils/food containers

IN	OUT	N/O	N/A	COS	REPEAT
<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

16A. Food-contact surfaces: cleaned & sanitized immersion 171° F and above

IN	OUT	N/O	N/A	COS	REPEAT
<input type="radio"/>	<input checked="" type="radio"/>		<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

Fail Notes 4-501.114 (A-E, F 1&2)

*Chemical Sanitization - Temperature, pH, Concentration and Hardness  
[The concentration of the sanitizing solution in the 3 bay sink was too strong (500ppm). The concentration of the solution should be within the range of 150-400ppm as indicated in the manufacturers instructions.]*

16B. Food contact surfaces cleaned and sanitized NMT 194° F, NLT 180° F

IN	OUT	N/O	N/A	COS	REPEAT
<input type="radio"/>	<input type="radio"/>		<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

16C. Mechanical warewashing equipment sanitization food contact surfaces, equip., utensils

IN	OUT	N/O	N/A	COS	REPEAT
<input type="radio"/>	<input type="radio"/>		<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

17. Proper disposition of returned, previously served reconditions, & unsafe food

IN	OUT	N/O	N/A	COS	REPEAT
<input type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>

### Time/Temperature Control for Safety Food (TCS Food)

18A. Proper cooking time & temperatures

IN	OUT	N/O	N/A	COS	REPEAT
<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

18B. Whole meat cooking and serving, storing

IN	OUT	N/O	N/A	COS	REPEAT
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

Inspector

Acknowledged Receipt :

Page 2 of 6

## Food Establishment Inspection Report - FDA

Time/Temperature Control for Safety Food (TCS Food)		IN	OUT	N/O	N/A	COS	REPEAT
18C. Microwave cooking of raw animal foods		<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
19. Proper reheating procedures for hot holding		<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
20. Proper cooling time & temperatures		<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
21. Proper hot holding temperatures		<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
Fail Notes	3-501.16 (A) *Hot TCS foods Maintained at or Above 135oF, Also for whole meat roasts (130F and above) [The temperature of the cheese pizza in the hot holding unit was 121 deg F. Maintaining food at a temperature of 135 deg F or greater during hot holding is sufficient to prevent the growth of pathogens responsible for foodborne illness.]						
22. Proper cold holding temperatures		<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
23. Proper Date Marking		<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
23B. TCS Foods Disposition		<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
24A. Time as a public health control: procedures		<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
24B. Time as a public health control: temperatures & discarding food		<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
24C. Time as a public health control: highly susceptible population (HSP)		<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
Consumer Advisory		IN	OUT	N/O	N/A	COS	REPEAT
25. Consumer advisory provided for raw or undercooked foods		<input type="radio"/>	<input type="radio"/>		<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
Highly Susceptible Populations (HSP)		IN	OUT	N/O	N/A	COS	REPEAT
26A. Pasteurized foods used; prohibited foods not offered		<input checked="" type="radio"/>	<input type="radio"/>		<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
26B. Reservice of foods		<input type="radio"/>	<input type="radio"/>		<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
Chemical		IN	OUT	N/O	N/A	COS	REPEAT
27. Food additives: approved and properly used		<input type="radio"/>	<input type="radio"/>		<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
28A. Toxic substances identified, stored and used		<input checked="" type="radio"/>	<input type="radio"/>		<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
28B. Poisonous materials, sanitizers, additives, medicines restriction, separation, storage		<input checked="" type="radio"/>	<input type="radio"/>		<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
28C. Conditions of Use: law		<input checked="" type="radio"/>	<input type="radio"/>		<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
Conformance with Approved Procedures		IN	OUT	N/O	N/A	COS	REPEAT
29A. Compliance with variance, specialized process, & HACCP plan		<input type="radio"/>	<input type="radio"/>		<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
29B. Treating juice- HACCP, reduced oxygen packaging w/out variance, conformance with approved procedures		<input type="radio"/>	<input type="radio"/>		<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
29C. When HACCP plan is required		<input type="radio"/>	<input type="radio"/>		<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

### GOOD RETAIL PRACTICES

Good Retail Practices are preventative measures to control the addition of pathogens, chemicals, and physical objects into foods.

IN = In compliance    OUT = not in compliance    COS - corrected on -site during inspection    REPEAT = repeat violation

Inspector \_\_\_\_\_

Acknowledged Receipt : \_\_\_\_\_

Page 3 of 6

## Food Establishment Inspection Report - FDA

Safe Food and Water		IN	OUT	N/O	N/A	COS	REPEAT
30. Pasteurized eggs used where required		<input type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>
31A. Water & ice from approved source		<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>
31B. Sampling, alternative water supply		<input type="radio"/>	<input type="radio"/>		<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
31C. Sampling report		<input type="radio"/>	<input type="radio"/>		<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
32. Variance obtained for specialized processing methods		<input type="radio"/>	<input type="radio"/>		<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
Food Temperature Control		IN	OUT	N/O	N/A	COS	REPEAT
33A. Proper cooling methods used; adequate equipment for temperature control		<input type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>
33B. Frozen food		<input type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>
34. Plant food properly cooked for hot holding		<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
35. Approved thawing methods used		<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
36A. Thermometers provided and accurate		<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>
36B. Thermometers function properly		<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>
Food Identification		IN	OUT	COS	REPEAT		
37A. Food properly labeled; original container		<input type="radio"/>	<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>		
37B. Food labels, labeling of ingredients		<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>		
Prevention of Food Contamination		IN	OUT	COS	REPEAT		
38A. Insects, rodents, & animals not present		<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>		
38B. Handling prohibition, controlling pests, prohibiting animals		<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>		
39A. Contamination prevented during food storage		<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>		
39B. Food display; ice used as an exterior coolant prohibited as an ingredient		<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>		
39C. Consumer self-service operations- utensils and monitoring		<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>		
40A. Personal cleanliness- prohibition jewelry		<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>		
40B. Maintenance of fingernails		<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>		
41. Wiping cloths; properly used and stored		<input type="radio"/>	<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>		
Fail Notes	<div style="display: flex; align-items: flex-start;"> <div style="width: 150px; border-right: 1px solid black; padding-right: 10px;"> 3-304.14 </div> <div> <b>Wiping Cloths, Use Limitation</b>  <i>[The wiping cloths were not being stored in sanitizing solution when not in use. Any wiping cloths that are not dry (except those used once and then laundered) must be stored in a sanitizer solution of adequate concentration between uses. The sanitizing solution must be changed as needed to minimize the accumulation of organic material and sustain proper concentration. The sanitizer concentration must be maintained by checking the solution periodically with an appropriate chemical test kit.]</i> </div> </div>						
42A. Washing Produce - following chemical manufacturers label		<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>		
42B. Washing produce		<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>		
42C. Washing produce- chemicals		<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>		

Inspector \_\_\_\_\_

Acknowledged Receipt : \_\_\_\_\_

Page 4 of 6

## Food Establishment Inspection Report - FDA

### Proper Use of Utensils

	IN	OUT	COS	REPEAT
43. In-use utensils; properly stored	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
44. Utensils, equipment & linens; properly stored, dried, and handled	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
45A. Single-use/ single service articles properly stored and used, required	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
45B. Single-use/service articles use limitation, kitchenware and tableware preventing contamination	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
46. Gloves used properly	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

### Utensils, Equipment and Vending

	IN	OUT	COS	REPEAT
47A. Food & non-food contact surfaces cleanable	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
47B. Food contact surfaces /utensils cleanability, molluscan shellfish tanks, consumer self-service	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
47C. Properly designed characteristics: food and non-food contact surfaces, molluscan shellfish tanks	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
48A. Warewashing facilities: installed, maintained, & used; test strips	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
48B. Operational warewashing machines	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
49. Non-food contact surfaces clean	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

### Physical Facilities

	IN	OUT	N/A	COS	REPEAT
50. Hot & cold water available; adequate pressure	<input checked="" type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>
51A. Plumbing installed; proper backflow devices	<input checked="" type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>
51B. Prohibiting a cross-connection, inspection and servicing system	<input checked="" type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>
51C. Approved system and cleanable fixtures, service sink	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
52A. Sewage and waste water properly disposed	<input checked="" type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>
52B. Grease traps easily accessible for cleaning	<input type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>
52C. Removing mobile food establishment waste	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
53A. Toilet facilities; properly constructed, supplied, & cleaned	<input checked="" type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>
53B. Toilet tissue availability	<input checked="" type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>
54. Garbage & refuse properly disposed; facilities maintained	<input checked="" type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>
55A. Physical facilities installed, maintained, & clean	<input checked="" type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>
55B. Private homes and living or sleeping quarters, use prohibition	<input checked="" type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>
56. Adequate ventilation & lighting; designated areas used	<input checked="" type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>

### MASSACHUSETTS ONLY REGULATIONS

Rules and Regulations adopted for use in Massachusetts only.

### Facilities

	IN	OUT	COS	REPEAT
57A. Catering	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
57B. When plans are reviewed, prerequisite for operations- valid permit	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

Inspector \_\_\_\_\_

Acknowledged Receipt : \_\_\_\_\_

Page 5 of 6

## Food Establishment Inspection Report - FDA

Facilities	IN	OUT	COS	REPEAT
57C. Contents of plans and specifications, preoperational inspections	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
58. Mobile Food Operations	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
59. Temporary Food Establishments	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
60. Residential Kitchens	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

Procedures	IN	OUT	COS	REPEAT
61. Anti-choking Procedures	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
62. Tobacco Products: Notice and Sale	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
63. Food Allergy Awareness Requirements	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

Inspector \_\_\_\_\_

Acknowledged Receipt : \_\_\_\_\_



**City of Newton**  
**Health and Human Services**  
 Deborah Youngblood, PhD, Commissioner  
 1000 Commonwealth Ave Newton, MA 02459  
 (617) 796-1420



**Public Health**  
 Prevent. Promote. Protect.

**Food Establishment Inspection Report - FDA**

**Insp Date:** 11/15/2018    **Business ID:** 1N2249  
**Business:** Memorial Spaulding School  
 250 Brookline St.

Newton, MA 02459

**Inspection:** 6N000066  
**Section:** 2  
**Phone:** 617-559-9600  
**Inspector:** 1N11123 Nicola Assan  
**Reason:** 1-Routine  
**Results:** No Follow-up R2

**Inspection Summary**

Official Order for Correction: Based on an inspection today, the items checked indicate violations of 105 CMR 590.000/ 2013 Federal Food Code. This report, when signed below by the Commissioner of Health / Agent constitutes an order by the Commissioner of Health. Failure to correct violations cited in this report may result in suspension or revocation of the food establishment permit and cessation of food establishment operations. If aggrieved by this order, you have the right to a hearing. The request must be in writing and submitted to the Commissioner of Health at the above address within 10 days of receipt of this order.

Est. Type 1 - Food Svc Establis License/Permit # \_\_\_\_\_ Risk Category 02 Risk Level Observed 02 Low

Foodborne Illness Complaint Investigated (All) ☐ Involving More Than Two Persons ☐

**FOODBORNE ILLNESS RISK FACTORS AND PUBLIC HEALTH INTERVENTIONS**

Compliance status: IN = in compliance OUT = not in compliance N/O = not observed N/A = not applicable

Marked in appropriate box for COS and/or R. COS = corrected on-site during inspection R = repeat violation

Risk factors are improper practices or procedures identified as the most prevalent contributing factors of foodborne illness or injury. Public Health Interventions are control measures to prevent foodborne illnesses or injury.

Supervision		IN	OUT	N/O	N/A	COS	REPEAT
1. PIC Present, Knowledge and Duties		⊙	○			□	□
2. Certified Food Protection Manager		○	⊙		○	□	□
<i>Fail Notes</i>	2-102.12 (A) <i>Certified food protection manager            [There was no certified food protection manager working in the kitchen at the time of the inspection. There was a serve safe certificate for 'Christen Smith' on the kitchen noticeboard, but she is not involved in the preparation of food at this particular kitchen. There should be at least one employee working in the school kitchen who handles and prepares food, that has shown proficiency in food safety and hygiene related issues through passing a test that is part of an accredited program.]</i>						

Employee Health / Responding to Contamination Events		IN	OUT	N/O	N/A	COS	REPEAT
3A. Employee Health: PIC Knowledge, Responsibilities & Reporting		⊙	○			□	□
3B. Employee Reporting to PIC		⊙	○			□	□

*Assan*

Inspector

Acknowledged Receipt : Tim Viveiros

Page 1 of 7

## Food Establishment Inspection Report - FDA

### Employee Health / Responding to Contamination Events

4. Proper Use of Restriction & Exclusion
5. Clean-up of Vomiting and Diarrheal Events

IN	OUT	N/O	N/A	COS	REPEAT
<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>
<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>

### Good Hygienic Practices

- 6A. Proper eating, tasting, drinking, or tobacco use
- 6B. Preventing contamination when tasting
7. No discharge from eyes, nose, and mouth

IN	OUT	N/O	N/A	COS	REPEAT
<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>
<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>
<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>

### Control of Hands as a Vehicle of Contamination

- 8A. Hands clean & properly washed
- 8B. Where to wash, hand antiseptics
9. No bare hand contact with RTE food or a pre-approved alternative procedure properly allowed
- 10A. Adequate handwashing sinks properly supplied and accessible
- 10B. Handwashing sinks accessible with proper signage, handwashing aids

IN	OUT	N/O	N/A	COS	REPEAT
<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>
<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>
<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>
<input type="radio"/>	<input checked="" type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>

*Fail Notes*     6-301.14     *Handwashing signage*  
*[There was no handwashing signage next to the handwashing sink. A sign or poster that notifies food employees to wash their hands shall be provided at all handwashing sinks used by food employees and shall be clearly visible to food employees.]*

### Approved Sources

- 11A. Milk, eggs, juice, bottled water, hermetically sealed food, game animals
- 11B. Packaged foods, labeling, whole muscle beef
- 11C. Obtaining raw fish, packaged meat & poultry, eggs
- 12A. Food received at proper temperature
- 12B. Shipping and receiving frozen food
13. Food in good condition, honestly presented, safe, & unadulterated
- 13B. Food package integrity
- 14A. Required records available: shellstock tags, parasite destruction
- 14B. Missing shellstock tags, destruction
- 14C. Parasite destruction- storing raw/partially cooked fish

IN	OUT	N/O	N/A	COS	REPEAT
<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>
<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

### Protection from Contamination

- 15A. Food separated & protected
- 15B. Cleaning equip/utensils/food containers
- 16A. Food-contact surfaces: cleaned & sanitized immersion 171° F and above

IN	OUT	N/O	N/A	COS	REPEAT
<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="radio"/>	<input checked="" type="radio"/>		<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

*ASDA*

Inspector

Acknowledged Receipt : Tim Viveiros

Page 2 of 7

# Food Establishment Inspection Report - FDA

Protection from Contamination

IN OUT N/O N/A COS REPEAT

Fail Notes

4-501.114 (A-E, F 1&2)

**Chemical Sanitization - Temperature, pH, Concentration and Hardness**  
[The concentration of the sanitizing solution in the red bucket was too strong (>400ppm). A chemical sanitizer used in a sanitizing solution for a manual or mechanical operation shall be used in accordance with the EPA registered label use instructions. In addition, the temperature of the sanitizing solution in the 3 bay compartment sink and the red bucket was 68.2 and 57.8 degrees F respectively. In order for the sanitizing solution (quaternary ammonium compound) to work effectively, it shall have a minimum temperature of 75 degrees F.]

4-702.11

**\*Frequency of Sanitization of Utensils and Food-Contact Surfaces of Equipment**  
[Dining room staff were observed using sanitizer as a 'cleaner'. Sanitizer is NOT a cleaner. The instructions on the sanitizer label state to clean first with a detergent, rinse THEN sanitize. Always follow the instructions on the chemicals label. Cleaning is a three (3) step process: Wash, Rinse then Sanitize. A container with soapy water should be available for proper cleaning. Using a Green Bucket is HIGHLY recommended. Sanitizer does not remove allergens, soapy water does. It is important to rinse off detergents after the wash step to avoid diluting or inactivating the sanitizer. If a surface needs to be wiped from crumbs or ingredients use a paper towel. Review and train the staff on proper cleaning procedures.]

16B. Food contact surfaces cleaned and sanitized NMT 194° F, NLT 180° F

☒ ☐ ☐ ☐ ☐

16C. Mechanical warewashing equipment sanitization food contact surfaces, equip., utensils

☐ ☐ ☒ ☐ ☐

17. Proper disposition of returned, previously served reconditions, & unsafe food

☒ ☐ ☐ ☐

Time/Temperature Control for Safety Food (TCS Food)

IN OUT N/O N/A COS REPEAT

18A. Proper cooking time & temperatures

☐ ☐ ☒ ☐ ☐ ☐

18B. Whole meat cooking and serving, storing

☐ ☐ ☐ ☒ ☐ ☐

18C. Microwave cooking of raw animal foods

☐ ☐ ☐ ☒ ☐ ☐

19. Proper reheating procedures for hot holding

☐ ☐ ☐ ☒ ☐ ☐

20. Proper cooling time & temperatures

☐ ☐ ☐ ☒ ☐ ☐

21. Proper hot holding temperatures

☐ ☐ ☒ ☐ ☐ ☐

**This item has Notes. See Footnote 1 at end of questionnaire.**

22. Proper cold holding temperatures

☒ ☐ ☐ ☐ ☐ ☐

23. Proper Date Marking

☒ ☐ ☐ ☐ ☐ ☐



Inspector

Acknowledged Receipt : Tim Viveiros

Page 3 of 7

## Food Establishment Inspection Report - FDA

### Time/Temperature Control for Safety Food (TCS Food)

	IN	OUT	N/O	N/A	COS	REPEAT
23B. TCS Foods Disposition	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
24A. Time as a public health control: procedures	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
24B. Time as a public health control: temperatures & discarding food	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
24C. Time as a public health control: highly susceptible population (HSP)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

### Consumer Advisory

	IN	OUT	N/O	N/A	COS	REPEAT
25. Consumer advisory provided for raw or undercooked foods	<input type="radio"/>	<input type="radio"/>		<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

### Highly Susceptible Populations (HSP)

	IN	OUT	N/O	N/A	COS	REPEAT
26A. Pasteurized foods used; prohibited foods not offered	<input type="radio"/>	<input type="radio"/>		<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
26B. Reservice of foods	<input type="radio"/>	<input type="radio"/>		<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

### Chemical

	IN	OUT	N/O	N/A	COS	REPEAT
27. Food additives: approved and properly used	<input type="radio"/>	<input type="radio"/>		<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
28A. Toxic substances identified, stored and used	<input checked="" type="radio"/>	<input type="radio"/>		<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
28B. Poisonous materials, sanitizers, additives, medicines restriction, separation, storage	<input checked="" type="radio"/>	<input type="radio"/>		<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
28C. Conditions of Use: law	<input checked="" type="radio"/>	<input type="radio"/>		<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

### Conformance with Approved Procedures

	IN	OUT	N/O	N/A	COS	REPEAT
29A. Compliance with variance, specialized process, & HACCP plan	<input type="radio"/>	<input type="radio"/>		<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
29B. Treating juice- HACCP, reduced oxygen packaging w/out variance, conformance with approved procedures	<input type="radio"/>	<input type="radio"/>		<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
29C. When HACCP plan is required	<input type="radio"/>	<input type="radio"/>		<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

### GOOD RETAIL PRACTICES

Good Retail Practices are preventative measures to control the addition of pathogens, chemicals, and physical objects into foods.

IN = In compliance OUT = not in compliance COS - corrected on -site during inspection REPEAT = repeat violation

### Safe Food and Water

	IN	OUT	N/O	N/A	COS	REPEAT
30. Pasteurized eggs used where required	<input type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>
31A. Water & ice from approved source	<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>
31B. Sampling, alternative water supply	<input type="radio"/>	<input type="radio"/>		<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
31C. Sampling report	<input type="radio"/>	<input type="radio"/>		<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
32. Variance obtained for specialized processing methods	<input type="radio"/>	<input type="radio"/>		<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

### Food Temperature Control

	IN	OUT	N/O	N/A	COS	REPEAT
33A. Proper cooling methods used; adequate equipment for temperature control	<input type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>
33B. Frozen food	<input type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>
34. Plant food properly cooked for hot holding	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>



Inspector

Acknowledged Receipt : Tim Viveiros

Page 4 of 7

## Food Establishment Inspection Report - FDA

Food Temperature Control	IN	OUT	N/O	N/A	COS	REPEAT
35. Approved thawing methods used	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
36A. Thermometers provided and accurate	<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>
36B. Thermometers function properly	<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>
Food Identification	IN	OUT			COS	REPEAT
37A. Food properly labeled; original container	<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>
37B. Food labels, labeling of ingredients	<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>
Prevention of Food Contamination	IN	OUT			COS	REPEAT
38A. Insects, rodents, & animals not present	<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>
38B. Handling prohibition, controlling pests, prohibiting animals	<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>
39A. Contamination prevented during food storage	<input type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>
39B. Food display; ice used as an exterior coolant prohibited as an ingredient	<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>
39C. Consumer self-service operations- utensils and monitoring	<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>
40A. Personal cleanliness- prohibition jewelry	<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>
40B. Maintenance of fingernails	<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>
41. Wiping cloths; properly used and stored	<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>
42A. Washing Produce - following chemical manufacturers label	<input type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>
42B. Washing produce	<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>
42C. Washing produce- chemicals	<input type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>
Proper Use of Utensils	IN	OUT			COS	REPEAT
43. In-use utensils; properly stored	<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>
44. Utensils, equipment & linens; properly stored, dried, and handled	<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>
45A. Single-use/ single service articles properly stored and used, required	<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>
45B. Single-use/service articles use limitation, kitchenware and tableware preventing contamination	<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>
46. Gloves used properly	<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>
Utensils, Equipment and Vending	IN	OUT			COS	REPEAT
47A. Food & non-food contact surfaces cleanable	<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>
47B. Food contact surfaces /utensils cleanability, molluscan shellfish tanks, consumer self-service	<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>
47C. Properly designed characteristics: food and non-food contact surfaces, molluscan shellfish tanks	<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>
48A. Warewashing facilities: installed, maintained, & used; test strips	<input type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>
48B. Operational warewashing machines	<input type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>
49. Non-food contact surfaces clean	<input type="radio"/>	<input checked="" type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>



Inspector

Acknowledged Receipt : Tim Viveiros

Page 5 of 7

## Food Establishment Inspection Report - FDA

Utensils, Equipment and Vending	IN   OUT   COS   REPEAT
---------------------------------	-------------------------

Fail Notes	4-601.11 (B&C)	<i>*Equipment, Food-Contact Surfaces, Nonfood-Contact Surfaces, and Utensils</i> <i>[The gaskets of the refrigerator were very dirty. Clean the gaskets of the refrigerator and maintain in a clean condition thereafter.]</i>
------------	----------------	---

Physical Facilities	IN   OUT   N/A   COS   REPEAT
---------------------	-------------------------------

50. Hot & cold water available; adequate pressure	⊙	○		□	□
51A. Plumbing installed; proper backflow devices	⊙	○		□	□
51B. Prohibiting a cross-connection, inspection and servicing system	⊙	○		□	□
51C. Approved system and cleanable fixtures, service sink	○	○	○	□	□
52A. Sewage and waste water properly disposed	⊙	○		□	□
52B. Grease traps easily accessible for cleaning	○	○		□	□
52C. Removing mobile food establishment waste	○	○	⊙	□	□
53A. Toilet facilities; properly constructed, supplied, & cleaned	⊙	○		□	□
53B. Toilet tissue availability	⊙	○		□	□
54. Garbage & refuse properly disposed; facilities maintained	○	⊙		□	□

Fail Notes	5-501.13	<i>Receptacles</i> <i>[There was no waste receptacle near the handwashing sink. Provide a small waste receptacle near the handwashing sink for the disposal of paper towels.]</i>
------------	----------	--

55A. Physical facilities installed, maintained, & clean	⊙	○		□	□
55B. Private homes and living or sleeping quarters, use prohibition	⊙	○		□	□
56. Adequate ventilation & lighting; designated areas used	⊙	○		□	□

### MASSACHUSETTS ONLY REGULATIONS

Rules and Regulations adopted for use in Massachusetts only.

Facilities	IN   OUT   COS   REPEAT
------------	-------------------------

57A. Catering	○	○		□	□
57B. When plans are reviewed, prerequisite for operations- valid permit	○	○		□	□
57C. Contents of plans and specifications, preoperational inspections	○	○		□	□
58. Mobile Food Operations	○	○		□	□
59. Temporary Food Establishments	○	○		□	□
60. Residential Kitchens	○	○		□	□

Procedures	IN   OUT   COS   REPEAT
------------	-------------------------

61. Anti-choking Procedures	○	○		□	□
62. Tobacco Products: Notice and Sale	○	○		□	□
63. Food Allergy Awareness Requirements	○	○		□	□



Inspector

Acknowledged Receipt : Tim Viveiros

Page 6 of 7

## Food Establishment Inspection Report - FDA

### Footnote 1

#### **Notes:**

Although there were no TCS (time/temperature for food safety) foods being hot held at the time of inspection, the temperature of the potatoes in the hot holding unit was recorded as 114.8 degrees F.

You need to ensure that any TCS foods being hot held should be maintained at a temperature of 135 degrees F and above.



Inspector

Acknowledged Receipt : Tim Viveiros

Page 7 of 7



**City of Newton**  
**Health and Human Services**  
 Deborah Youngblood, PhD, Commissioner  
 1000 Commonwealth Ave Newton, MA 02459  
 (617) 796-1420



**Public Health**  
 Prevent. Promote. Protect.

**Food Establishment Inspection Report - FDA**

**Insp Date:** 5/13/2019    **Business ID:** 1N2249  
**Business:** Memorial Spaulding School  
 250 Brookline St.

Newton, MA 02459

**Inspection:** 6N000120  
**Section:** 2  
**Phone:** 617-559-9600  
**Inspector:** 1N11123 Nicola Assan  
**Reason:** 1-Routine  
**Results:** No Follow-up R2

**Inspection Summary**

Official Order for Correction: Based on an inspection today, the items checked indicate violations of 105 CMR 590.000/ 2013 Federal Food Code. This report, when signed below by the Commissioner of Health / Agent constitutes an order by the Commissioner of Health. Failure to correct violations cited in this report may result in suspension or revocation of the food establishment permit and cessation of food establishment operations. If aggrieved by this order, you have the right to a hearing. The request must be in writing and submitted to the Commissioner of Health at the above address within 10 days of receipt of this order.

Est. Type 1 - Food Svc Establish License/Permit # \_\_\_\_\_ Risk Category 02 Risk Level Observed 02 Low

Foodborne Illness Complaint Investigated (All) ☐ Involving More Than Two Persons ☐

**FOODBORNE ILLNESS RISK FACTORS AND PUBLIC HEALTH INTERVENTIONS**

Compliance status: IN = in compliance OUT = not in compliance N/O = not observed N/A = not applicable

Marked in appropriate box for COS and/or R. COS = corrected on-site during inspection R = repeat violation

Risk factors are improper practices or procedures identified as the most prevalent contributing factors of foodborne illness or injury. Public Health Interventions are control measures to prevent foodborne illnesses or injury.

**Supervision**

- 1. PIC Present, Knowledge and Duties
- 2. Certified Food Protection Manager

IN	OUT	N/O	N/A	COS	REPEAT
⊙	○			□	□
⊙	○		○	□	□

**Employee Health / Responding to Contamination Events**

- 3A. Employee Health: PIC Knowledge, Responsibilities & Reporting
- 3B. Employee Reporting to PIC
- 4. Proper Use of Restriction & Exclusion
- 5. Clean-up of Vomiting and Diarrheal Events

IN	OUT	N/O	N/A	COS	REPEAT
⊙	○			□	□
⊙	○			□	□
⊙	○			□	□
⊙	○			□	□

**Good Hygienic Practices**

- 6A. Proper eating, tasting, drinking, or tobacco use
- 6B. Preventing contamination when tasting

IN	OUT	N/O	N/A	COS	REPEAT
⊙	○	○		□	□
⊙	○	○		□	□

*Assan*

Inspector

Acknowledged Receipt : Tim Viveiros

Page 1 of 6

## Food Establishment Inspection Report - FDA

Good Hygienic Practices		IN	OUT	N/O	N/A	COS	REPEAT
7. No discharge from eyes, nose, and mouth		<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>
Control of Hands as a Vehicle of Contamination		IN	OUT	N/O	N/A	COS	REPEAT
8A. Hands clean & properly washed		<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>
8B. Where to wash, hand antiseptics		<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>
9. No bare hand contact with RTE food or a pre-approved alternative procedure properly allowed		<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
10A. Adequate handwashing sinks properly supplied and accessible		<input type="radio"/>	<input checked="" type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>
Fail Notes	<div style="border: 1px solid black; padding: 5px;"> <p>6-301.12 <i>Hand Drying Provision</i>  <i>[There were no paper towels in the paper towel dispenser to the hand sink in the kitchen. Each handwashing sink or group of adjacent handwashing sinks shall be provided with individual disposable towels or; a continuous towel system that supplies the user with a clean towel or; a heated-air hand drying device or; a hand drying device that employs an air-knife system that delivers high velocity, pressurized air at ambient temperatures.]</i></p> </div>						
10B. Handwashing sinks accesible with proper signage, handwashing aids		<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>
Approved Sources		IN	OUT	N/O	N/A	COS	REPEAT
11A. Milk, eggs, juice, bottled water, hermetically sealed food, game animals		<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
11B. Packaged foods, labeling, whole muscle beef		<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
11C. Obtaining raw fish, packaged meat & poultry, eggs		<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
12A. Food received at proper temperature		<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
12B. Shipping and receiving frozen food		<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
13. Food in good condition, honestly presented, safe, & unadulterated		<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>
13B. Food package integrity		<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>
14A. Required records available: shellstock tags, parasite destruction		<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
14B. Missing shellstock tags, destruction		<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
14C. Parasite destruction- storing raw/partially cooked fish		<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
Protection from Contamination		IN	OUT	N/O	N/A	COS	REPEAT
15A. Food separated & protected		<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
15B. Cleaning equip/utensils/food containers		<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
16A. Food-contact surfaces: cleaned & sanitized immersion 171° F and above		<input checked="" type="radio"/>	<input type="radio"/>		<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
16B. Food contact surfaces cleaned and sanitized NMT 194° F, NLT 180° F		<input checked="" type="radio"/>	<input type="radio"/>		<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
16C. Mechanical warewashing equipment sanitization food contact surfaces, equip., utensils		<input checked="" type="radio"/>	<input type="radio"/>		<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
17. Proper disposition of returned, previously served reconditions, & unsafe food		<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>
Time/Temperature Control for Safety Food (TCS Food)		IN	OUT	N/O	N/A	COS	REPEAT
18A. Proper cooking time & temperatures		<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

*NASSAM*

Inspector

Acknowledged Receipt : Tim Viveiros

Page 2 of 6

## Food Establishment Inspection Report - FDA

Time/Temperature Control for Safety Food (TCS Food)		IN	OUT	N/O	N/A	COS	REPEAT
18B. Whole meat cooking and serving, storing		<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
18C. Microwave cooking of raw animal foods		<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
19. Proper reheating procedures for hot holding		<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
20. Proper cooling time & temperatures		<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
21. Proper hot holding temperatures		<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
<div style="border: 1px solid black; padding: 2px; width: 150px; float: left;">Fail Notes</div> <div style="clear: both;"></div> <div style="border: 1px solid black; padding: 5px; margin-top: 5px;">           3-501.16 (A) <i>*Hot TCS foods Maintained at or Above 135oF, Also for whole meat roasts (130F and above) [The temperature of the chicken nuggets in the hot holding unit was 116 degrees F. TCS (time/temperature control for safety) foods shall be maintained at a temperature of 135 degrees F or above during hot holding.]</i> </div>							
22. Proper cold holding temperatures		<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
23. Proper Date Marking		<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
23B. TCS Foods Disposition		<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
24A. Time as a public health control: procedures		<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
24B. Time as a public health control: temperatures & discarding food		<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
24C. Time as a public health control: highly susceptible population (HSP)		<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
Consumer Advisory		IN	OUT	N/O	N/A	COS	REPEAT
25. Consumer advisory provided for raw or undercooked foods		<input type="radio"/>	<input type="radio"/>		<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
Highly Susceptible Populations (HSP)		IN	OUT	N/O	N/A	COS	REPEAT
26A. Pasteurized foods used; prohibited foods not offered		<input type="radio"/>	<input type="radio"/>		<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
26B. Reservice of foods		<input type="radio"/>	<input type="radio"/>		<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
Chemical		IN	OUT	N/O	N/A	COS	REPEAT
27. Food additives: approved and properly used		<input type="radio"/>	<input type="radio"/>		<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
28A. Toxic substances identified, stored and used		<input checked="" type="radio"/>	<input type="radio"/>		<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
28B. Poisonous materials, sanitizers, additives, medicines restriction, separation, storage		<input checked="" type="radio"/>	<input type="radio"/>		<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
28C. Conditions of Use: law		<input checked="" type="radio"/>	<input type="radio"/>		<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
Conformance with Approved Procedures		IN	OUT	N/O	N/A	COS	REPEAT
29A. Compliance with variance, specialized process, & HACCP plan		<input type="radio"/>	<input type="radio"/>		<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
29B. Treating juice- HACCP, reduced oxygen packaging w/out variance, conformance with approved procedures		<input type="radio"/>	<input type="radio"/>		<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
29C. When HACCP plan is required		<input type="radio"/>	<input type="radio"/>		<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

*Assam*

Inspector

Acknowledged Receipt : Tim Viveiros

Page 3 of 6

## Food Establishment Inspection Report - FDA

### GOOD RETAIL PRACTICES

Good Retail Practices are preventative measures to control the addition of pathogens, chemicals, and physical objects into foods.

IN = In compliance    OUT = not in compliance    COS - corrected on -site during inspection    REPEAT = repeat violation

#### Safe Food and Water

	IN	OUT	N/O	N/A	COS	REPEAT
30. Pasteurized eggs used where required	<input type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>
31A. Water & ice from approved source	<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>
31B. Sampling, alternative water supply	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>
31C. Sampling report	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>
32. Variance obtained for specialized processing methods	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>

#### Food Temperature Control

	IN	OUT	N/O	N/A	COS	REPEAT
33A. Proper cooling methods used; adequate equipment for temperature control	<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>
33B. Frozen food	<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>
34. Plant food properly cooked for hot holding	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
35. Approved thawing methods used	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
36A. Thermometers provided and accurate	<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>
36B. Thermometers function properly	<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>

#### Food Identification

	IN	OUT	COS	REPEAT
37A. Food properly labeled; original container	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
37B. Food labels, labeling of ingredients	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

#### Prevention of Food Contamination

	IN	OUT	COS	REPEAT
38A. Insects, rodents, & animals not present	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
38B. Handling prohibition, controlling pests, prohibiting animals	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
39A. Contamination prevented during food storage	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
39B. Food display; ice used as an exterior coolant prohibited as an ingredient	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
39C. Consumer self-service operations- utensils and monitoring	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
40A. Personal cleanliness- prohibition jewelry	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
40B. Maintenance of fingernails	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
41. Wiping cloths; properly used and stored	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
42A. Washing Produce - following chemical manufacturers label	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
42B. Washing produce	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
42C. Washing produce- chemicals	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

#### Proper Use of Utensils

	IN	OUT	COS	REPEAT
43. In-use utensils; properly stored	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

*NASSAM*

Inspector

Acknowledged Receipt : Tim Viveiros

Page 4 of 6

## Food Establishment Inspection Report - FDA

Proper Use of Utensils		IN	OUT	COS	REPEAT
44. Utensils, equipment & linens; properly stored, dried, and handled		⊙	○	□	□
45A. Single-use/ single service articles properly stored and used, required		⊙	○	□	□
45B. Single-use/service articles use limitation, kitchenware and tableware preventing contamination		⊙	○	□	□
46. Gloves used properly		⊙	○	□	□

Utensils, Equipment and Vending		IN	OUT	COS	REPEAT
47A. Food & non-food contact surfaces cleanable		⊙	○	□	□
47B. Food contact surfaces /utensils cleanability, molluscan shellfish tanks, consumer self-service		⊙	○	□	□
47C. Properly designed characteristics: food and non-food contact surfaces, molluscan shellfish tanks		⊙	○	□	□
48A. Warewashing facilities: installed, maintained, & used; test strips		⊙	○	□	□
48B. Operational warewashing machines		⊙	○	□	□
49. Non-food contact surfaces clean		○	⊙	□	□

*Fail Notes* | 4-601.11 (B&C) | *\*Equipment, Food-Contact Surfaces, Nonfood-Contact Surfaces, and Utensils*  
*[The gaskets of the refrigerator wer worn and very dirty. Clean and repair, or replace the gaskets of the refrigerator.]*

Physical Facilities		IN	OUT	N/A	COS	REPEAT
50. Hot & cold water available; adequate pressure		⊙	○		□	□
51A. Plumbing installed; proper backflow devices		⊙	○		□	□
51B. Prohibiting a cross-connection, inspection and servicing system		⊙	○		□	□
51C. Approved system and cleanable fixtures, service sink		⊙	○	○	□	□
52A. Sewage and waste water properly disposed		⊙	○		□	□
52B. Grease traps easily accessible for cleaning		⊙	○		□	□
52C. Removing mobile food establishment waste		○	○	⊙	□	□
53A. Toilet facilities; properly constructed, supplied, & cleaned		⊙	○		□	□
53B. Toilet tissue availability		⊙	○		□	□
54. Garbage & refuse properly disposed; facilities maintained		○	⊙		□	□

*Fail Notes* | 5-501.13 | *Receptacles*  
*[There was no waste receptacle near the handwashing sink in the kitchen. Provide a small receptacle near the handwashing sink for the disposal of paper towels.]*

55A. Physical facilities installed, maintained, & clean		⊙	○		□	□
55B. Private homes and living or sleeping quarters, use prohibition		⊙	○		□	□
56. Adequate ventilation & lighting; designated areas used		⊙	○		□	□

### MASSACHUSETTS ONLY REGULATIONS

Rules and Regulations adopted for use in Massachusetts only.

*Mass*

Inspector

Acknowledged Receipt : Tim Viveiros

Page 5 of 6

## Food Establishment Inspection Report - FDA

### Facilities

	IN	OUT	COS	REPEAT
57A. Catering	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
57B. When plans are reviewed, prerequisite for operations- valid permit	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
57C. Contents of plans and specifications, preoperational inspections	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
58. Mobile Food Operations	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
59. Temporary Food Establishments	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
60. Residential Kitchens	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

### Procedures

	IN	OUT	COS	REPEAT
61. Anti-choking Procedures	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
62. Tobacco Products: Notice and Sale	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
63. Food Allergy Awareness Requirements	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

*Assam*

Inspector

Acknowledged Receipt : Tim Viveiros

Page 6 of 6



City of Newton  
Health and Human Services  
Deborah Youngblood, PhD, Commissioner  
1000 Commonwealth Ave Newton, MA 02459  
(617) 796-1420



Public Health  
Prevent. Promote. Protect.

Food Establishment Inspection Report - FDA

Insp Date: 10/13/2016 Business ID: 1N2272

Business: Newton North High School  
457 Walnut St.

Newton, MA 02460

Inspection: AN000204

Section: 4

Phone: 617-559-6327

Inspector: RS90085 Robin Williams

Reason: 1-Routine

Results: No Follow-up

Inspection Summary

Official Order for Correction: Based on an inspection today, the items checked indicate violations of 105 CMR 590.000/ 2013 Federal Food Code. This report, when signed below by the Commissioner of Health / Agent constitutes an order by the Commissioner of Health. Failure to correct violations cited in this report may result in suspension or revocation of the food establishment permit and cessation of food establishment operations. If aggrieved by this order, you have the right to a hearing. The request must be in writing and submitted to the Commissioner of Health at the above address within 10 days of receipt of this order.

Est. Type 1 - Food Svc Establis License/Permit # \_\_\_\_\_ Risk Category 02 Risk Level Observed 02 Low

Foodborne Illness Complaint Investigated (All) ☐ Involving More Than Two Persons ☐

FOODBORNE ILLNESS RISK FACTORS AND PUBLIC HEALTH INTERVENTIONS

Compliance status: IN = in compliance OUT = not in compliance N/O = not observed N/A = not applicable

Marked in appropriate box for COS and/or R. COS = corrected on-site during inspection R = repeat violation

Risk factors are improper practices or procedures identified as the most prevalent contributing factors of foodborne illness or injury. Public Health Interventions are control measures to prevent foodborne illnesses or injury.

Supervision

1. PIC Present, Knowledge and Duties

IN	OUT	N/O	N/A	COS	REPEAT
<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>

2. Certified Food Protection Manager

<input checked="" type="radio"/>	<input type="radio"/>		<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
----------------------------------	-----------------------	--	-----------------------	--------------------------	--------------------------

Employee Health / Responding to Contamination Events

3A. Employee Health: PIC Knowledge, Responsibilities & Reporting

<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>
----------------------------------	-----------------------	--	--	--------------------------	--------------------------

3B. Employee Reporting to PIC

<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>
----------------------------------	-----------------------	--	--	--------------------------	--------------------------

4. Proper Use of Restriction & Exclusion

<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>
----------------------------------	-----------------------	--	--	--------------------------	--------------------------

5. Clean-up of Vomiting and Diarrheal Events

<input type="radio"/>	<input checked="" type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>
-----------------------	----------------------------------	--	--	--------------------------	--------------------------

*Robin Williams*

Inspector

Acknowledged Receipt : Rachel Oppenheimer

Page 1 of 15

## Food Establishment Inspection Report - FDA

### Employee Health / Responding to Contamination Events

IN OUT N/O N/A COS REPEAT

**Fail Notes** 2-501.11 *Procedures involving clean-up of vomit and diarrhea*  
*[According to the PIC, the only procedures that are in place for a vomit and diarrhea accident are to contain the accident, send the employee home (if the accident was from an employee) and call the custodian. It was not determined what the custodian would do if such an accident occurred. A food establishment shall have procedures for employees to follow when responding to vomiting or diarrheal events that involve the discharge of vomitus or fecal matter onto surfaces in the food establishment. The procedures shall address the specific actions employees must take to minimize the spread of contamination and the exposure of employees, consumers, food, and surfaces to vomitus or fecal matter. Discuss what actions will be taken when such an event occurs and have a plan in place that is specific. Please submit the plan to Inspector Williams for review. This section of the code will be applicable for ALL Newton Schools therefore it is HIGHLY recommended to develop a plan for all locations.]*

### Good Hygienic Practices

IN OUT N/O N/A COS REPEAT

6A. Proper eating, tasting, drinking, or tobacco use

☐ ☒ ☐ ☐ ☐

**Fail Notes** 2-401.11 *\*Eating, Drinking, or Using Tobacco*  
*[Employee's drinks were observed store with food ingredients and on shelves above prep tables. An employee shall eat and / or drink only in designated areas where the contamination of exposed food, clean equipment, utensils, linens, and unwrapped single-use items cannot result. Employees may drink from closed beverage containers such as cups with caps and straws, caps with openings for hot beverages or sport bottles which do not constantly required opening and closing. Do not drink from bottles. It is HIGHLY recommended to designate and label specific areas for the employee drinks.]*

6B. Preventing contamination when tasting

☒ ☐ ☐ ☐ ☐

7. No discharge from eyes, nose, and mouth

☒ ☐ ☐ ☐ ☐

### Control of Hands as a Vehicle of Contamination

IN OUT N/O N/A COS REPEAT

8A. Hands clean & properly washed

☒ ☐ ☐ ☐ ☐

8B. Where to wash, hand antiseptics

☒ ☐ ☐ ☐ ☐

9. No bare hand contact with RTE food or a pre-approved alternative procedure properly allowed

☒ ☐ ☐ ☐ ☐ ☐

10A. Adequate handwashing sinks properly supplied and accessible

☐ ☒ ☐ ☐

**Fail Notes** 5-202.12 (A) *Handwashing sink, installation- temperature/ mixing/ combo*  
*[The hand sink hot water temperature located on the front service line by the grill was 79°F even after letting the hot water run for a period of time. The hand sink located by the 3-compartment sink originally did not have hot water at 100°F and above however was repaired within minutes by the PIC. A handwashing sink shall be equipped to provide water at a temperature of at least 100°F through a mixing valve or combination faucet.]*



Inspector

Acknowledged Receipt : Rachel Oppenheimer

Page 2 of 15

## Food Establishment Inspection Report - FDA

### Control of Hands as a Vehicle of Contamination

IN OUT N/O N/A COS REPEAT

**Fail Notes** 5-205.11 *Accessibility, Operation and Maintenance*  
*[The hand sink located in the elementary prep kitchen was not accessible. After correcting the violation, towards the end of the Inspection, the hand sink was not accessible again (blocked with empty boxes). Prep was still taking place in the kitchen. This appears to be a bad habit. A hand washing sink shall be maintained so that it is accessible at all times for employee use. Avoid storing items such as large trash cans, brooms, crates etc. in front of any hand sink. Hand washing at the designated hand sinks should be encouraged therefore accessible at all times.]*

10B. Handwashing sinks accessible with proper signage, handwashing aids

☐ ☒

☐

☐

**Fail Notes** 6-301.14 *Handwashing signage*  
*[A sign or poster was observed not posted at all hand sinks. A sign or poster that notifies food employees to wash their hands shall be provided at all Handwashing Sinks used by food employees and shall be clearly visible to food employees. Post a sign or poster.]*

### Approved Sources

IN OUT N/O N/A COS REPEAT

11A. Milk, eggs, juice, bottled water, hermetically sealed food, game animals

☒

☐

☐

☐

☐

☐

11B. Packaged foods, labeling, whole muscle beef

☒

☐

☐

☐

☐

☐

11C. Obtaining raw fish, packaged meat & poultry, eggs

☒

☐

☐

☐

☐

☐

12A. Food received at proper temperature

☐

☐

☒

☐

☐

☐

12B. Shipping and receiving frozen food

☐

☐

☒

☐

☐

☐

13. Food in good condition, honestly presented, safe, & unadulterated

☒

☐

☐

☐

13B. Food package integrity

☒

☐

☐

☐

14A. Required records available: shellstock tags, parasite destruction

☐

☐

☐

☒

☐

☐

14B. Missing shellstock tags, destruction

☐

☐

☐

☒

☐

☐

14C. Parasite destruction- storing raw/partially cooked fish

☐

☐

☐

☒

☐

☐

### Protection from Contamination

IN OUT N/O N/A COS REPEAT

15A. Food separated & protected

☐

☒

☐

☐

☐

☐

*John Williams*

Inspector

Acknowledged Receipt : Rachel Oppenheimer

Page 3 of 15

# Food Establishment Inspection Report - FDA

Protection from Contamination

IN OUT N/O N/A COS REPEAT

Fail Notes 3-302.11 (A 1&2)

**\*Packaged and Unpackaged Food - Separation, Packaging, and Segregation**  
*[Raw Turkey Burgers were observed stored above hamburgers in the "Got Milk" refrigerator located on the Cook / Service Line. Store Raw Turkey Burgers below hamburgers. (A) Food shall be protected from cross contamination by: (1) Separating raw animal foods during storage, preparation, holding, and display from: (a) Raw ready-to-eat food including other raw animal foods such as fish for sushi or molluscan shellfish, or other raw ready-to-eat food such as fruits and vegetables, and (b) Cooked ready-to-eat food; (c) Frozen, commercially processed and packaged raw animal food may be stored or displayed with or above frozen, commercially processed and packaged, ready-to-eat food. Except when combined as ingredients, separating types of raw animal foods from each other such as beef, fish, lamb, pork, and poultry during storage, preparation, holding, and display by: (a) Using separate equipment for each type, or (b) Arranging each type of food in equipment so that cross contamination of one type with another is prevented, and (c) Preparing each type of food at different times or in separate areas (3) Properly cleaning and sanitizing equipment and utensils (4-602.11(A) and § 4-703.11); (4) Storing the food in packages, covered containers, or wrappings; Separating fruits and vegetables, before they are washed ]*

15B. Cleaning equip/utensils/food containers

⊙ ○ ○ ○ □ □

16A. Food-contact surfaces: cleaned & sanitized immersion 171° F and above

○ ⊙ ○ □ □

Fail Notes 4-501.114 (A-E, F 1&2)

**Chemical Sanitization - Temperature, pH, Concentration and Hardness**  
*[Some red sanitizer buckets were observed with a concentration less than 150 ppm. Maintain QAC 146 sanitizer concentration between 150 - 400 ppm (according to the chemical manufacturer label). Change the solution when the concentration is not within that range.]*

*John Williams*

Inspector

Acknowledged Receipt : Rachel Oppenheimer

Page 4 of 15

# Food Establishment Inspection Report - FDA

Protection from Contamination

IN OUT N/O N/A COS REPEAT

Fail Notes 4-703.11

*\*Methods of Sanitization - Hot Water and Chemical*

*[An employee was observed ware washing at the 3-compartment sink. When the equipment was placed in the sanitizing solution, it was not COMPLETELY IMMERSED. Train the employees to completely submerge the wares / equipment so that all areas are exposed to the QAC sanitizer. Additionally, in conversation with another employee working in the elementary kitchen, the equipment does not remain in the sanitizing solution for the required sixty (60) seconds prior to air drying. Training was provided. Always follow the instructions on the sanitizer label for the appropriate "Contact Time". Continue to train the entire staff.]*

16B. Food contact surfaces cleaned and sanitized NMT 194° F, NLT 180° F

☒ ☐ ☐ ☐ ☐

16C. Mechanical warewashing equipment sanitization food contact surfaces, equip., utensils

☒ ☐ ☐ ☐ ☐

17. Proper disposition of returned, previously served reconditions, & unsafe food

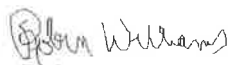
☒ ☐ ☐ ☐

Time/Temperature Control for Safety Food (TCS Food)

IN OUT N/O N/A COS REPEAT

18A. Proper cooking time & temperatures

☐ ☒ ☐ ☐ ☐ ☐



Inspector

Acknowledged Receipt : Rachel Oppenheimer

Page 5 of 15

# Food Establishment Inspection Report - FDA

Time/Temperature Control for Safety Food (TCS Food)

IN OUT N/O N/A COS REPEAT

Fail Notes

3-401.11 (A, B2)

\*Raw Animal Foods - Cooking

[The employee cooking raw animal products on the grill was not observed testing the internal cooking temperature. When asked how does he tell if the product is cooked, his answer was he uses touch and if there is no liquid coming from the product. When a turkey burger was tested as it came off the grill, the internal temperature observed was 158°F. The internal temperature of Hamburgers / Cheeseburgers = 155°F for 15 seconds and Turkey Burgers - 165°F for 15 seconds. A food thermometer and / or T-sticks should be used to verify the cooking temperature. The following are the Proper Cooking Time & Temperature Requirements for TCS Foods: Raw animal foods such as Eggs, Fish, Meat, Poultry, and Foods containing these Raw Animal Foods, shall be cooked to heat all parts of the food to an temperature and for a time that complies with one of the following methods based on the food that is being cooked: Raw Eggs (broken for on request for immediate service) = 145°F or above for 15 seconds. Fish, Meat, Game Animal = 145°F or above for 15 seconds. Comminuted Meat or Fish, Raw Eggs (not for immediate service), Comminuted Meat on a Child's Menu = 155°F or above for 15 seconds. Whole Meat Roasts (Beef, Corned Beef, Lamb, Pork, Cured Pork Roast, Formed Roasts) = 130°F or above 112 minutes [or as specified in the FDA 2013 Food Code Chart 3-401.11(B)]. Poultry, Stuffed Fish / Meat / Pork / Poultry / Ratites / Pasta or Stuffing containing Fish, Meat, Poultry, or Ratites = 165°F or above for 15 seconds. Wild Game = 165°F or above for 15 seconds. Whole-Muscle, Intact Beef Steaks = Cooked to a surface temperature = 145°F on top and bottom and a cooked Color change is achieved on all external surfaces. Raw Animal Foods Cooked in a Microwave = 165°F or above [Rotated, Stirred, Covered - Let Stand for two (2) minutes after cooking]. All other Raw Animal Foods = 145°F or above 15 seconds.]

18B. Whole meat cooking and serving, storing

☐ ☐ ☐ ☒ ☐ ☐

18C. Microwave cooking of raw animal foods

☐ ☐ ☐ ☒ ☐ ☐

19. Proper reheating procedures for hot holding

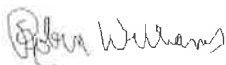
☐ ☐ ☒ ☐ ☐ ☐

20. Proper cooling time & temperatures

☐ ☐ ☒ ☐ ☐ ☐

21. Proper hot holding temperatures

☐ ☒ ☐ ☐ ☐ ☐



Inspector

Acknowledged Receipt : Rachel Oppenheimer

Page 6 of 15

# Food Establishment Inspection Report - FDA

Time/Temperature Control for Safety Food (TCS Food)

IN OUT N/O N/A COS REPEAT

Fail Notes 3-501.16 (A) \*Hot TCS foods Maintained at or Above 135oF, Also for whole meat roasts (130F and above)  
[Chicken Sandwiches located on the Front Service Line in the Hot Box were observed with internal temperatures of 100°F - 125°F. The Chicken Sandwiches located in back Hot Box were observed with an internal temperature of 120°F. Tater Tots located on the Grill on the Front Service Line were observed with an internal temperature of 103°F. Except during preparation, cooking, or cooling, or when time is used as the public health control, TCS (Time / Temperature Control for Safety Food) Food shall be maintained at 135°F or above.]

## 22. Proper cold holding temperatures

☐ ☒ ☐ ☐ ☐ ☐

Fail Notes 3-501.16(A2 &B) \*Cold PHFs Maintained at or Below 41oF- also pertains to untreated eggs (45F)  
[The internal temperatures of TCS Foods located on the Salad Bar were observed with internal temperatures between 48°F - 54°F. All TCS Foods should be pre-chilled in the walk-in PRIOR to placing them in the Salad Bar refrigerator unit. Have the unit evaluated. If at any time a unit is found to not operate properly, take Corrective Action. This could consist of setting up an ice bath. When setting up an ice bath, the container with the ice should be larger than the food containers that are place in the bath. The ice and water should completely surround the food containers. Another alternative to making an ice bath is to purchase and use cold master pans. These pans have a built-in material that freezes when stored in the freezer therefore creating an instant ice bath. Maintain the internal temperature of TCS Foods at 41°F and below. Additionally, review the food prep procedures for these items. If an issue is observed in the set procedure, revise the plan so that long term corrective action is in place. Train the staff. The employees were unsure what time the tems were placed in the unit however all items will be removed after the lunch period. The unit should not be used until an internal temperature of TCS Foods can be maintained at 41°F and below. ]

## 23. Proper Date Marking

☐ ☒ ☐ ☐ ☐ ☐

*Rachel Oppenheimer*

Inspector

Acknowledged Receipt : Rachel Oppenheimer

Page 7 of 15

# Food Establishment Inspection Report - FDA

Time/Temperature Control for Safety Food (TCS Food)

IN OUT N/O N/A COS REPEAT

Fail Notes

3-501.17

Date marking: RTE, TCS

[Not all refrigerated RTE TCS Foods were observed with clearly marked dates. According to the PIC, Day Dots will be used however the system is not yet up and running. Since there was so much confusion on the prepping of the Pasta, it is HIGHLY suggested to implement the Date Marking System ASAP and train the staff on the procedures. Refrigerated RTE TCS Foods prepared and held in a food establishment for more than 24 hours shall be clearly marked to indicate the date or day by which the food shall be consumed on the premises, sold, or discarded when held at a temperature of 41°F or less for a maximum of seven (7) days. The day of preparation shall be counted as day one (1) Refrigerated RTE TCS Food prepared and packaged by a food processing plant shall be clearly marked, at the time the original container is opened in a food establishment and if the food is held for more than 14 hours, to indicate the date or day by which the food shall be consumed on the premises, sold, or discarded, based on the temperature and time combinations. The day or date marked by the food establishment may not exceed a manufacturer's use-by date based on food safety. A refrigerated RTE TCS Food ingredient or a portion of a refrigerated, RTE, TCS food that is subsequently combined with additional ingredients or portions of food shall retain the date marking of the earliest-prepared or first-prepared ingredient. A date marking system may include: 1) Using a method approved by the Regulatory Authority for refrigerated, RTE, TCS Food that is frequently rewrapped, such as lunchmeat or a roast, or for which date marking is impractical, such as soft serve mix or milk in a dispensing machine; 2) Marking the date or day of preparation, with a procedure to discard the food on or before the last date or day by which the food must be consumed on the premises, sold, or discarded; 4) Using calendar dates, days of the week, color-coded marks, or other effective marking methods, provided that the marking system is disclosed to the Regulatory Authority upon request.]

23B. TCS Foods Disposition

☐ ☐ ☒ ☐ ☐ ☐

24A. Time as a public health control: procedures

☐ ☐ ☐ ☒ ☐ ☐

24B. Time as a public health control: temperatures & discarding food

☐ ☐ ☐ ☒ ☐ ☐

24C. Time as a public health control: highly susceptible population (HSP)

☐ ☐ ☐ ☒ ☐ ☐

Consumer Advisory

IN OUT N/O N/A COS REPEAT

25. Consumer advisory provided for raw or undercooked foods

☐ ☐ ☐ ☒ ☐ ☐

Highly Susceptible Populations (HSP)

IN OUT N/O N/A COS REPEAT

26A. Pasteurized foods used; prohibited foods not offered

☐ ☐ ☐ ☒ ☐ ☐

26B. Reservice of foods

☐ ☐ ☐ ☒ ☐ ☐

Chemical

IN OUT N/O N/A COS REPEAT

27. Food additives: approved and properly used

☐ ☐ ☐ ☒ ☐ ☐

28A. Toxic substances identified, stored and used

☐ ☒ ☐ ☐ ☐ ☐



Inspector

Acknowledged Receipt : Rachel Oppenheimer

Page 8 of 15

# Food Establishment Inspection Report - FDA

Chemical

IN OUT N/O N/A COS REPEAT

Fail Notes 7-102.11 \*Common Name - Working Containers  
[A chemical spray bottle was observed not labeled. Another spray bottle was labeled "Sanitizer" however had a orange color liquid in it. Both bottles were located by the dish machine. Both spray bottles were removed. Working containers used for storing chemicals such as cleaners and sanitizers taken from bulk supplies shall be clearly and individually identified with the common name of the material. Label all containers / spray bottles. Be sure the chemical in the bottle matches the name on the working container (bottle). Corrected. Review chemical use and the importance of reading labels on bottles with the entire staff.]

28B. Poisonous materials, sanitizers, additives, medicines restriction, separation, storage ☐ ☒ ☐ ☐ ☐

Fail Notes 7-201.11 \*Separation - Storage  
[A chemical spray bottle (orange force) was observed stored right next to food contact equipment on the lower shelf of the prep table in the elementary prep kitchen. Another spray bottle (sanitizer) was observed stored on a shelf located on the Front Service Line next to a box of open gloves. Poisonous or toxic materials (chemicals) shall be stored so they cannot contaminate food, equipment, utensils, linens, and single-use items by: (A) Separating by spacing or partitioning, and (B) Locating the poisonous or toxic materials (chemicals) in an area that is not above food, equipment, utensils, linens, and single-use items. This does not apply to equipment and utensil cleaners and sanitizers that are stored in ware washing areas for availability and convenience if the materials are stored to prevent contamination of food, equipment, utensils, linens, and single-use items. The bottle was moved.]

7-204.11 \*Sanitizers, Criteria - Chemicals  
[The sanitizer concentration in one red bucket was above 400 ppm (QAC 146). QAC 146 concentration range is 150 - 400 ppm according to the manufacturers label. Read the label on the chemical bottle and mix the solution according to the manufacturer's instructions. It is recommended to mix the concentration to 300 ppm. It is advised to wet the wiping cloths PRIOR to placing them in the buckets so that the cloths do not absorb the chemical therefore lowering the sanitizer concentration. ]

28C. Conditions of Use: law ☒ ☐ ☐ ☐ ☐

Conformance with Approved Procedures

IN OUT N/O N/A COS REPEAT

29A. Compliance with variance, specialized process, & HACCP plan ☐ ☐ ☒ ☐ ☐

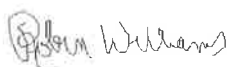
29B. Treating juice- HACCP, reduced oxygen packaging w/out variance, conformance with approved procedures ☐ ☐ ☒ ☐ ☐

29C. When HACCP plan is required ☐ ☐ ☒ ☐ ☐

## GOOD RETAIL PRACTICES

Good Retail Practices are preventative measures to control the addition of pathogens, chemicals, and physical objects into foods.

IN = In compliance OUT = not in compliance COS - corrected on -site during inspection REPEAT = repeat violation



Inspector

Acknowledged Receipt : Rachel Oppenheimer

Page 9 of 15

## Food Establishment Inspection Report - FDA

Safe Food and Water		IN	OUT	N/O	N/A	COS	REPEAT
	30. Pasteurized eggs used where required	<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>
	31A. Water & ice from approved source	<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>
	31B. Sampling, alternative water supply	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>
	31C. Sampling report	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>
	32. Variance obtained for specialized processing methods	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>
Food Temperature Control		IN	OUT	N/O	N/A	COS	REPEAT
	33A. Proper cooling methods used; adequate equipment for temperature control	<input type="radio"/>	<input checked="" type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>
Fail Notes	<div style="display: flex;"> <div style="width: 15%; border-right: 1px solid black; padding-right: 5px;">3-501.15 (A)</div> <div> <p><b>Cooling Methods for TCS foods</b>  <i>[Upon arrival, employees were observed preparing Wraps and Pasta in the elementary kitchen. The internal temperature of the Penne Pasta was observed between 49°F - 53°F. According to the Chef's (Patrick and Dwyane) some Pasta was cooked the day prior and some that morning. There was A LOT of confusion surrounding the Pasta prep. Towards the end of the inspection, during the exit interview, several tins of Pasta was observed sitting at room temperature. The internal temperature was observed 59°F. Best Practice for prepping food would be to: Remove a small portion of food from temperature control only when it will be immediately prepped. After prepping, place the food back under temperature control. At this time, it appears the elementary food prep is not an organized process. It is HIGHLY recommended to conduct a study on prepping, cooling and the amount of time it takes to perform each. Logs are a great way of evaluating a system to determine if it meets the requirements of the code. When cooling foods, use one or more of the following acceptable methods based on the type of food being cooled: 1) Place food in shallow pans 2) Separate food into smaller or thinner portions 3) Use rapid cooling equipment such ice wands, blast chillers 4) Stir the food in a container placed in an ice water bath 5) Use containers that facilitates the heat transfer 6) Add ice as an ingredient, or other effective methods. Arrange the food in the equipment to provide maximum heat transfer through the container walls. Avoid covering foods until they are thoroughly cooled. Try to use the top shelf in the walk-in refrigerators for cooling. Cooked TCS Foods shall be cooled: 1) Within two (2) hours from 135°F to 70°F and 2) within total of six (6) hours from 135°F to 41°F or less. If items are prepared from ambient temperatures such as tuna fish, cool to 41°F within four (4) hours or less.]</i></p> </div> </div>						
	33B. Frozen food	<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>
	34. Plant food properly cooked for hot holding	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
	35. Approved thawing methods used	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
	36A. Thermometers provided and accurate	<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>
	36B. Thermometers function properly	<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>

Rachel Oppenheimer

Inspector

Acknowledged Receipt : Rachel Oppenheimer

Page 10 of 15

## Food Establishment Inspection Report - FDA

### Food Identification

IN OUT COS REPEAT

37A. Food properly labeled; original container

☐ ☒ ☐ ☐

*Fail Notes*    3-302.12    *Food Storage Containers Identified with Common Name of Food*  
*[Not all working containers / squeeze bottles holding food or ingredients*  
*were not labeled. Working containers of food / ingredients that are*  
*removed from their original packages for use, such as oils, salt etc.*  
*shall be identified with the common name of the food. Label all*  
*containers, bins and squeeze bottles.]*

37B. Food labels, labeling of ingredients

☐ ☒ ☐ ☐

*Fail Notes*    3-602.11 (B5)    *\*Labeling of major food allergen*  
*[Some food items such as Tuna Salad, packaged and available for*  
*self-service, was observed not labeled with ingredients (more than*  
*just Tuna was observed in the mixture). Food packaged in a food*  
*establishment shall be labeled to include the following information:*  
*The common name of the food, if made from more than two*  
*ingredients, a list of ingredients and sub-ingredients in descending*  
*order of predominance by weight, including a declaration of*  
*artificial colors, artificial flavors and chemical preservatives, the net*  
*quantity of contents, the name and place of business of the*  
*manufacturer, packer, or distributor, and the major food allergen.]*

### Prevention of Food Contamination

IN OUT COS REPEAT

38A. Insects, rodents, & animals not present

☐ ☒ ☐ ☐

*Fail Notes*    6-501.112    *Removing dead or trapped birds, insects, rodents and other pests*  
*[A mouse, still alive was observed on a glue board located by the dish*  
*machine. Check the traps daily. Dead or trapped birds, insects,*  
*rodents, and other pests shall be removed from control devices and*  
*the premises at a frequency that prevents their accumulation,*  
*decomposition, or the attraction of pests.]*

38B. Handling prohibition, controlling pests, prohibiting animals

☒ ☐ ☐ ☐

39A. Contamination prevented during food storage

☐ ☒ ☐ ☐

*Fail Notes*    3-305.14    *Food Preparation*  
*[The double doors to the elementary prep kitchen were observed*  
*opened during the entire inspection and during food prep. During*  
*preparation, unpackaged food shall be protected from environmental*  
*sources of contamination. Keep the doors closed so that the food is*  
*protected and to prevent individuals who are not necessary to the food*  
*establishment operation from entering the food preparation area, food*  
*storage and ware washing areas.]*

39B. Food display; ice used as an exterior coolant prohibited as an ingredient

☒ ☐ ☐ ☐

*Fail Notes*    3-306.11    *Food Display-Preventing Contamination by Consumers*  
*[Some garnishes located on the Front Service Line (by the Burgers)*  
*were observed not protected against contamination. Food on display*  
*shall be protected from contamination by the use of packaging; counter,*  
*service line, or salad bar food guards; display cases; or other effective*  
*means.]*

39C. Consumer self-service operations- utensils and monitoring

☐ ☒ ☐ ☐

*Rachel Williams*

Inspector

Acknowledged Receipt : Rachel Oppenheimer

Page 11 of 15

# Food Establishment Inspection Report - FDA

## Prevention of Food Contamination

IN OUT COS REPEAT

*Fail Notes* 3-306.13 (B-C) \*Consumer Self-Service Operations  
[The Rolls located on the Salad Bar were observed without a utensil. Consumer self-service operations for RTE (Ready-to-Eat) Foods shall be provided with suitable utensils or effective dispensing methods that protect the food from contamination. Always provide a suitable utensil. Corrected.]

40A. Personal cleanliness- prohibition jewelry

☐ ☒ ☐ ☐

*Fail Notes* 2-303.11 Prohibition-Jewelry  
[An employee serving food on the service line was observed wearing a watch. Except for a plain ring such as a wedding band, while preparing food, food employees may not wear jewelry including medical information jewelry on their arms and hands.]

40B. Maintenance of fingernails

☒ ☐ ☐ ☐

41. Wiping cloths; properly used and stored

☒ ☐ ☐ ☐

42A. Washing Produce - following chemical manufacturers label

☒ ☐ ☐ ☐

42B. Washing produce

☒ ☐ ☐ ☐

42C. Washing produce- chemicals

☒ ☐ ☐ ☐

## Proper Use of Utensils

IN OUT COS REPEAT

43. In-use utensils; properly stored

☐ ☒ ☐ ☐

*Fail Notes* 3-304.12 In-Use Utensils, Between-Use Storage  
[The ice machine scoop was observed stored on top of the ice machine. During pauses in food preparation, store the dispensing utensil in one of the following approved manners: In the food with the handle above the top of the food and container / or in equipment that can be closed such as bins of sugar etc., on a clean portion of the food preparation table or cooking equipment only if the equipment is cleaned and sanitized at least every four (4) hours, In running water of sufficient velocity to flush particulates to the drain, In a clean, protected location if the utensil such as an ice scoop are used with non TCS foods, or In a container of water if the water is maintained at 135°F and above. Do not use ice water. Do not store knives wedged between equipment.]

44. Utensils, equipment & linens; properly stored, dried, and handled

☐ ☒ ☐ ☐

*Fail Notes* 4-903.11 (A-B & D) Equipment, Utensils, Linens and Single-Service and Single-Use Articles-Storing  
[A splash guard was not observed on the left side of the hand sink located in the elementary prep kitchen next to the "Sanitized" side drain board. Place splash guard on the left side of the hand sink. If it is decided to change the Wash, Rinse, Sanitize direction (presently operates from right to left) from left to right (so that the Wash compartment is next to the hand sink), then a splash guard would not be necessary. Cleaned equipment and utensils, laundered linens, and single-service and single-use items (to go containers) shall be stored in a clean, dry location; where they are not exposed to splash, dust, or other contamination; and at least 6 inches above the floor. Clean equipment and utensils shall be stored in a self-draining position that allows air drying; and covered or inverted.]

45A. Single-use/ single service articles properly stored and used, required

☒ ☐ ☐ ☐

*John Williams*

Inspector

Acknowledged Receipt : Rachel Oppenheimer

Page 12 of 15

# Food Establishment Inspection Report - FDA

## Proper Use of Utensils

IN OUT COS REPEAT

45B. Single-use/service articles use limitation, kitchenware and tableware preventing contamination

☐ ☒ ☐ ☐

**Fail Notes** 4-903.11 (A&C) *Equipment, Utensils, Linens and Single-Service and Single-Use Articles-Storing*  
*[Some single-use items located in the dry storage room and on the top shelf on the elementary prep line were observed not stored upside down and / or protected against potential contamination. Additionally, the plastic cups available for self-service of water were not stored upside down. Single-service and single-use items shall be stored in a clean, dry location; where they are not exposed to splash, dust, or other contamination; and at least 6 inches above the floor and kept in the original protective package or stored by using other means that afford protection from contamination. Since single-use items are not designed to be cleaned and re-used; therefore, they must be properly stored and protected to prevent from possible contamination.]*

46. Gloves used properly

☒ ☐ ☐ ☐

## Utensils, Equipment and Vending

IN OUT COS REPEAT

47A. Food & non-food contact surfaces cleanable

☒ ☐ ☐ ☐

47B. Food contact surfaces /utensils cleanability, molluscan shellfish tanks, consumer self-service

☒ ☐ ☐ ☐

47C. Properly designed characteristics: food and non-food contact surfaces, molluscan shellfish tanks

☒ ☐ ☐ ☐

48A. Warewashing facilities: installed, maintained, & used; test strips

☐ ☒ ☐ ☐

**Fail Notes** 4-302.13 *Temperature measuring devices, manual warewashing*  
*[An irreversible registering temperature indicator was not provided or available. In hot water mechanical ware washing operations, an irreversible registering temperature indicator shall be provided and readily accessible for measuring the utensil surface temperature. Obtain and use 160°F Thermolabels or an irreversible registering temperature indicator. Test the machine at least daily. A source for thermolabels is: www.paperthermometer.com]*

48B. Operational warewashing machines

☐ ☒ ☐ ☐

**Fail Notes** 4-501.16 *Warewashing Sinks, Use Limitation*  
*[The following sign was observed on several sinks that are used for warewashing / food prep: "This sink can be used for hand washing, cleaning and drinking. Please use cold water tap ONLY for drinking water". It was unclear who posted these signs. Since these signs are not accurate, please have them removed. A ware washing sink may not be used for handwashing. If a ware washing sink is used to wash wiping cloths, produce, or thaw food, the sink shall be cleaned before and after each time it is used to wash wiping cloths or wash produce or thaw food. Sinks used to wash or thaw food shall be sanitized before and after using the sink to wash produce or thaw food.]*

49. Non-food contact surfaces clean

☐ ☒ ☐ ☐

**Fail Notes** 4-601.11 (B&C) *\*Equipment, Food-Contact Surfaces, Nonfood-Contact Surfaces, and Utensils*  
*[The inside area of the milk chest(s) were observed slightly dirty. Nonfood-contact surfaces of equipment shall be cleaned at a frequency necessary to preclude accumulation of soil residues.]*

*Rachel Oppenheimer*

Inspector

Acknowledged Receipt : Rachel Oppenheimer

Page 13 of 15

## Food Establishment Inspection Report - FDA

### Physical Facilities

	IN	OUT	N/A	COS	REPEAT
50. Hot & cold water available; adequate pressure	<input checked="" type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>
51A. Plumbing installed; proper backflow devices	<input checked="" type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>
51B. Prohibiting a cross-connection, inspection and servicing system	<input checked="" type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>
51C. Approved system and cleanable fixtures, service sink	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
52A. Sewage and waste water properly disposed	<input checked="" type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>
52B. Grease traps easily accessible for cleaning	<input checked="" type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>
52C. Removing mobile food establishment waste	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
53A. Toilet facilities; properly constructed, supplied, & cleaned	<input checked="" type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>
53B. Toilet tissue availability	<input checked="" type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>
54. Garbage & refuse properly disposed; facilities maintained	<input checked="" type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>
55A. Physical facilities installed, maintained, & clean	<input type="radio"/>	<input checked="" type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>

### Fail Notes

- 6-501.113 *Storing maintenance tools; brooms and mops*  
*[Some brooms etc. were observed stored by the hand sink located by the 3-compartment sink. Maintenance tools such as brooms, mops, vacuum cleaners, and similar items shall be stored so they do not contaminate food, equipment, utensils, linens, and single-use items and in an orderly manner that facilitates cleaning the area used for storing the maintenance tools. Corrected.]*
- 6-501.114 *Maintaining Premises, Unnecessary Items and Litter*  
*[Some areas of the Kitchen / Elementary Prep appeared cluttered with items that "may" not be necessary / used in the Food Operation. The premises shall be free of items that are unnecessary to the operation or maintenance of the establishment such as equipment that is nonfunctional or no longer used.]*
- 6-501.12 *Cleaning, Frequency and Restrictions*  
*[The following were observed dirty: The walk-in refrigerator ceiling (dusty) and The physical facilities shall be cleaned as often as necessary to keep them clean. Rodent droppings were observed on the floor in the dry storage room. Rodent droppings shall be cleaned up frequently using a strong solution. Avoid sweeping the droppings. If after cleaning more droppings are observed, this is a sign that there is still an active problem. After cleaning observe the areas for new droppings.]*

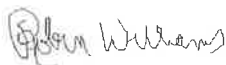
55B. Private homes and living or sleeping quarters, use prohibition	<input checked="" type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>
56. Adequate ventilation & lighting; designated areas used	<input checked="" type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>

### MASSACHUSETTS ONLY REGULATIONS

Rules and Regulations adopted for use in Massachusetts only.

### Facilities

	IN	OUT	COS	REPEAT
57A. Catering	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
57B. When plans are reviewed, prerequisite for operations- valid permit	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
57C. Contents of plans and specifications, preoperational inspections	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>



Inspector

Acknowledged Receipt : Rachel Oppenheimer

Page 14 of 15

## Food Establishment Inspection Report - FDA

### Facilities

58. Mobile Food Operations

IN OUT COS REPEAT

☐ ☐ ☐ ☐

59. Temporary Food Establishments

☐ ☐ ☐ ☐

60. Residential Kitchens

☐ ☐ ☐ ☐

### Procedures

61. Anti-choking Procedures

IN OUT COS REPEAT

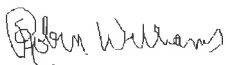
☒ ☐ ☐ ☐

62. Tobacco Products: Notice and Sale

☐ ☐ ☐ ☐

63. Food Allergy Awareness Requirements

☐ ☐ ☐ ☐



Inspector

Acknowledged Receipt : Rachel Oppenheimer

Page 15 of 15



**City of Newton**  
**Health and Human Services**  
 Deborah Youngblood, PhD, Commissioner  
 1000 Commonwealth Ave Newton, MA 02459  
 (617) 796-1420



**Public Health**  
 Prevent. Promote. Protect.

**Food Establishment Inspection Report - FDA**

**Insp Date:** 10/16/2017    **Business ID:** 1N2272  
**Business:** Newton North High School  
 457 Walnut St.

Newton, MA 02460

**Inspection:** CN000351  
**Section:** 4  
**Phone:** 559-6327  
**Inspector:** 1N11121 Derek Kwok  
**Reason:** 1-Routine  
**Results:** No Follow-up R2

**Inspection Summary**

Official Order for Correction: Based on an inspection today, the items checked indicate violations of 105 CMR 590.000/ 2013 Federal Food Code. This report, when signed below by the Commissioner of Health / Agent constitutes an order by the Commissioner of Health. Failure to correct violations cited in this report may result in suspension or revocation of the food establishment permit and cessation of food establishment operations. If aggrieved by this order, you have the right to a hearing. The request must be in writing and submitted to the Commissioner of Health at the above address within 10 days of receipt of this order.

Est. Type 1 - Food Svc Establis License/Permit # \_\_\_\_\_ Risk Category 02 Risk Level Observed 02 Low

Foodborne Illness Complaint Investigated (All) ☐ Involving More Than Two Persons ☐

**FOODBORNE ILLNESS RISK FACTORS AND PUBLIC HEALTH INTERVENTIONS**

Compliance status: IN = in compliance OUT = not in compliance N/O = not observed N/A = not applicable

Marked in appropriate box for COS and/or R. COS = corrected on-site during inspection R = repeat violation

Risk factors are improper practices or procedures identified as the most prevalent contributing factors of foodborne illness or injury. Public Health Interventions are control measures to prevent foodborne illnesses or injury.

Supervision	IN	OUT	N/O	N/A	COS	REPEAT
1. PIC Present, Knowledge and Duties	⊙	○			□	□
2. Certified Food Protection Manager	⊙	○	○		□	□
Employee Health / Responding to Contamination Events	IN	OUT	N/O	N/A	COS	REPEAT
3A. Employee Health: PIC Knowledge, Responsibilities & Reporting	⊙	○			□	□
3B. Employee Reporting to PIC	⊙	○			□	□
4. Proper Use of Restriction & Exclusion	⊙	○			□	□
5. Clean-up of Vomiting and Diarrheal Events	⊙	○			□	□
Good Hygienic Practices	IN	OUT	N/O	N/A	COS	REPEAT
6A. Proper eating, tasting, drinking, or tobacco use	○	⊙	○		□	☑

*Derek Kwok*

Inspector

Acknowledged Receipt : Rachel Oppenheimer

Page 1 of 11

# Food Establishment Inspection Report - FDA

## Good Hygienic Practices

IN OUT N/O N/A COS REPEAT

**Fail Notes** 2-401.11 *\*Eating, Drinking, or Using Tobacco*  
*[Drinks were observed on prep tables in the kitchen. An employee shall eat and / or drink only in designated areas where the contamination of exposed food, clean equipment, utensils, linens, and unwrapped single-use items cannot result. Employees may drink from closed beverage containers such as cups with caps and straws, caps with openings for hot beverages or sport bottles which do not constantly required opening and closing. Do not drink from bottles. It is HIGHLY recommended to designate and label specific areas for the employee drinks. There is a designated area for employee drinks but drinks were observed on multiple shelves in this area. Have the employees use the bottom shelf for their drinks.]*

6B. Preventing contamination when tasting ☒ ☐ ☐ ☐ ☐  
 7. No discharge from eyes, nose, and mouth ☒ ☐ ☐ ☐ ☐

## Control of Hands as a Vehicle of Contamination

IN OUT N/O N/A COS REPEAT

8A. Hands clean & properly washed ☒ ☐ ☐ ☐ ☐  
 8B. Where to wash, hand antiseptics ☐ ☐ ☐ ☐ ☐  
 9. No bare hand contact with RTE food or a pre-approved alternative procedure properly allowed ☒ ☐ ☐ ☐ ☐ ☐  
 10A. Adequate handwashing sinks properly supplied and accessible ☐ ☒ ☐ ☐ ☐ ☒

**Fail Notes** 5-205.11 *Accessibility, Operation and Maintenance*  
*[The handsink in the elementary school prep kitchen was blocked by two trash barrels. A hand washing sink shall be maintained so that it is accessible at all times for employee use. A hand washing sink may not be used for purposes other than handwashing. Facilities must be maintained in a condition that promotes handwashing and restricted for that use. Convenient accessibility of a handwashing facility encourages timely handwashing which provides a break in the chain of contamination from the hands of food employees to food or food-contact surfaces. Sinks used for food preparation and ware washing can become sources of contamination if used as handwashing facilities by employees returning from the toilet or from duties which have contaminated their hands.]*

10B. Handwashing sinks accesible with proper signage, handwashing aids ☐ ☒ ☐ ☐ ☐ ☒

**Fail Notes** 6-301.14 *Handwashing signage*  
*[A sign or poster was observed not posted at all hand sinks. A sign or poster that notifies food employees to wash their hands shall be provided at all Handwashing Sinks used by food employees and shall be clearly visible to food employees. Post a sign or poster.]*

## Approved Sources

IN OUT N/O N/A COS REPEAT

11A. Milk, eggs, juice, bottled water, hermetically sealed food, game animals ☒ ☐ ☐ ☐ ☐ ☐  
 11B. Packaged foods, labeling, whole muscle beef ☒ ☐ ☐ ☐ ☐ ☐  
 11C. Obtaining raw fish, packaged meat & poultry, eggs ☒ ☐ ☐ ☐ ☐ ☐

*Dan Kuehl*

Inspector

Acknowledged Receipt : Rachel Oppenheimer

Page 2 of 11

# Food Establishment Inspection Report - FDA

## Approved Sources

	IN	OUT	N/O	N/A	COS	REPEAT
12A. Food received at proper temperature	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
12B. Shipping and receiving frozen food	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
13. Food in good condition, honestly presented, safe, & unadulterated	<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>
13B. Food package integrity	<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>
14A. Required records available: shellstock tags, parasite destruction	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
14B. Missing shellstock tags, destruction	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
14C. Parasite destruction- storing raw/partially cooked fish	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

## Protection from Contamination

	IN	OUT	N/O	N/A	COS	REPEAT
--	----	-----	-----	-----	-----	--------

15A. Food separated & protected

*Fail Notes* 3-304.15 (A) *Gloves, use limitation- one task/ contaminated*  
*[An employee was observed touching a raw burger then touched a RTE item without changing gloves or washing their hands. Employee was educated by inspector Williams. Single-use gloves shall be used for only one task such as working with Ready-to-Eat (RTE) Food or with Raw Animal Food, used for no other purpose, and discarded when damaged or soiled, or when interruptions occur in the operation. Hands shall be clean before donning clean gloves. When gloves have been worn for a period of time, sweat builds up that could contain bacteria. Train the entire staff. Be sure all Managers are setting an example for the employees by frequently washing their hands as well when prepping and / or handling food.]*

15B. Cleaning equip/utensils/food containers

*Fail Notes* 3-302.11 (A 3-8) *Cleaning equipment/utensils, storing, cleaning hermetically sealed containers, storing damaged foods, separating fruits and vegetables before washing*  
*[Unwashed Produce (tomatoes in walkin) were observed stored above washed Produce and Ready-to-Eat (RTE) Foods. Foods shall be protected from contamination by separating fruits and vegetables, before they are washed from Ready-to-Eat Food.]*

16A. Food-contact surfaces: cleaned & sanitized immersion 171° F and above

16B. Food contact surfaces cleaned and sanitized NMT 194° F, NLT 180° F

*Fail Notes* 4-501.112 *Mechanical Warewashing Equipment - Hot Water Sanitization Temperatures*  
*[The dishmachine was not reaching a temperature of at least 160°F at the plate. Have the machine serviced and use the 3-bay until it reaches at least 160°F at the plate. In a mechanical operation, the temperature of the fresh hot water sanitizing rinse as it enters the manifold may not be more than 194°F, or less than 180°F. When the sanitizing rinse temperature exceeds 194°F at the manifold, the water becomes volatile and begins to vaporize reducing its ability to convey sufficient heat to utensil surfaces.]*

*Dash Kneel*

Inspector

Acknowledged Receipt : Rachel Oppenheimer

Page 3 of 11

# Food Establishment Inspection Report - FDA

## Protection from Contamination

IN OUT N/O N/A COS REPEAT

Fail Notes 4-601.11 (A) \*Equipment, Food-Contact Surfaces, and Utensils Clean  
[The can openers in the kitchen and elementary school prep area were observed dirty. Clean. Equipment food-contact surfaces and utensils shall be clean to sight and touch.]

16C. Mechanical warewashing equipment sanitization food contact surfaces, equip., utensils ☒ ☐ ☐ ☐ ☐

17. Proper disposition of returned, previously served reconditions, & unsafe food ☒ ☐ ☐ ☐

## Time/Temperature Control for Safety Food (TCS Food)

IN OUT N/O N/A COS REPEAT

18A. Proper cooking time & temperatures ☒ ☐ ☐ ☐ ☐ ☐

18B. Whole meat cooking and serving, storing ☐ ☐ ☐ ☒ ☐ ☐

18C. Microwave cooking of raw animal foods ☐ ☐ ☐ ☒ ☐ ☐

19. Proper reheating procedures for hot holding ☐ ☐ ☒ ☐ ☐ ☐

20. Proper cooling time & temperatures ☒ ☐ ☐ ☐ ☐ ☐

21. Proper hot holding temperatures ☐ ☒ ☐ ☐ ☐ ☒

Fail Notes 3-501.16 (A) \*Hot TCS foods Maintained at or Above 135oF, Also for whole meat roasts (130F and above)  
[Foods in the hot holding unit at the burrito station were between 129-133°F. Except during preparation, cooking, or cooling, or when time is used as the public health control, TCS (Time / Temperature Control for Safety Food) Food shall be maintained at 135°F or above.]

22. Proper cold holding temperatures ☐ ☒ ☐ ☐ ☐ ☒

Fail Notes 3-501.16(A2 &B) \*Cold PHFs Maintained at or Below 41oF- also pertains to untreated eggs (45F)  
[The following TCS (Time / Temperature Control for Safety Food) foods had the following internal temperatures: Cold cuts, sliced tomatoes, and cheese in the sandwich area were between 48-50°F. Salsa on ice 51.2°F on customer side by the burrito area. Pepperoni 44.6°F and cheese 45.3°F in unit across from sandwich area. In the self serve salad area, olives 43°F, pasta 69-72.7 °F, and eggs 52.3°F. Yogurt by the salad bar was 46°F. Teriyaki sauce was observed out at room temp even though the label states to refrigerate after opening (thrown away). All foods above temperature (except teriyaki sauce) were recently prepared and placed in units. There was a log that had a few temps above 41 when employees placed food items in refrigeration units, educate and train employees in corrective actions.

Maintain the internal temperature of TCS Foods at 41°F and below.]

23. Proper Date Marking ☒ ☐ ☐ ☐ ☐ ☐

23B. TCS Foods Disposition ☒ ☐ ☐ ☐ ☐ ☐

24A. Time as a public health control: procedures ☐ ☐ ☐ ☒ ☐ ☐



Inspector

Acknowledged Receipt : Rachel Oppenheimer

Page 4 of 11

## Food Establishment Inspection Report - FDA

### Time/Temperature Control for Safety Food (TCS Food)

24B. Time as a public health control: temperatures & discarding food

IN	OUT	N/O	N/A	COS	REPEAT
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

24C. Time as a public health control: highly susceptible population (HSP)

<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
-----------------------	-----------------------	-----------------------	----------------------------------	--------------------------	--------------------------

### Consumer Advisory

25. Consumer advisory provided for raw or undercooked foods

IN	OUT	N/O	N/A	COS	REPEAT
<input type="radio"/>	<input type="radio"/>		<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

### Highly Susceptible Populations (HSP)

26A. Pasteurized foods used; prohibited foods not offered

IN	OUT	N/O	N/A	COS	REPEAT
<input type="radio"/>	<input type="radio"/>		<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

26B. Reservice of foods

<input type="radio"/>	<input type="radio"/>		<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
-----------------------	-----------------------	--	----------------------------------	--------------------------	--------------------------

### Chemical

27. Food additives: approved and properly used

IN	OUT	N/O	N/A	COS	REPEAT
<input type="radio"/>	<input type="radio"/>		<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

28A. Toxic substances identified, stored and used

<input type="radio"/>	<input checked="" type="radio"/>		<input type="radio"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
-----------------------	----------------------------------	--	-----------------------	--------------------------	-------------------------------------

Fail Notes 7-102.11

*\*Common Name - Working Containers*

*[A chemical spray bottle by the slicer was observed without a label. Working containers used for storing chemicals such as cleaners and sanitizers taken from bulk supplies shall be clearly and individually identified with the common name of the material. Label all containers / spray bottles. Be sure the chemical in the bottle matches the name on the working container (bottle).]*

28B. Poisonous materials, sanitizers, additives, medicines restriction, separation, storage

<input type="radio"/>	<input checked="" type="radio"/>		<input type="radio"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
-----------------------	----------------------------------	--	-----------------------	--------------------------	-------------------------------------

Fail Notes 7-201.11

*\*Separation - Storage*

*[Chemical spray bottles were observed stored next to food and food equipment (on table right next to the slicer and next to the prep sink across from the stoves). Poisonous or toxic materials (chemicals) shall be stored so they cannot contaminate food, equipment, utensils, linens, and single-use items by: (A) Separating by spacing or partitioning, and (B) Locating the poisonous or toxic materials (chemicals) in an area that is not above food, equipment, utensils, linens, and single-use items. This does not apply to equipment and utensil cleaners and sanitizers that are stored in ware washing areas for availability and convenience if the materials are stored to prevent contamination of food, equipment, utensils, linens, and single-use items.]*

7-204.11

*\*Sanitizers, Criteria - Chemicals*

*[An employee made a bucket of sanitizer, but the concentration was too high (above 400- QAC). Training was provided. Always follow the mixing (concentration) instructions on the chemical bottle label. More is not better. More could be toxic. Use the test papers to measure the concentration. Have the color chart available so that employees can compare the test results.]*

28C. Conditions of Use: law

<input checked="" type="radio"/>	<input type="radio"/>		<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
----------------------------------	-----------------------	--	-----------------------	--------------------------	--------------------------

### Conformance with Approved Procedures

29A. Compliance with variance, specialized process, & HACCP plan

IN	OUT	N/O	N/A	COS	REPEAT
<input type="radio"/>	<input type="radio"/>		<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

29B. Treating juice- HACCP, reduced oxygen packaging w/out variance, conformance with approved procedures

<input type="radio"/>	<input type="radio"/>		<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
-----------------------	-----------------------	--	----------------------------------	--------------------------	--------------------------

*David Kneel*

Inspector

Acknowledged Receipt : Rachel Oppenheimer

Page 5 of 11

# Food Establishment Inspection Report - FDA

Conformance with Approved Procedures

IN OUT N/O N/A COS REPEAT

29C. When HACCP plan is required

☐ ☐ ☒ ☐ ☐

## GOOD RETAIL PRACTICES

Good Retail Practices are preventative measures to control the addition of pathogens, chemicals, and physical objects into foods.

IN = In compliance OUT = not in compliance COS - corrected on -site during inspection REPEAT = repeat violation

### Safe Food and Water

IN OUT N/O N/A COS REPEAT

30. Pasteurized eggs used where required

☒ ☐ ☐ ☐

31A. Water & ice from approved source

☒ ☐ ☐ ☐

31B. Sampling, alternative water supply

☐ ☐ ☒ ☐ ☐

31C. Sampling report

☐ ☐ ☒ ☐ ☐

32. Variance obtained for specialized processing methods

☐ ☐ ☒ ☐ ☐

### Food Temperature Control

IN OUT N/O N/A COS REPEAT

33A. Proper cooling methods used; adequate equipment for temperature control

☐ ☒ ☐ ☒

Fail Notes 3-501.15 (A)

#### Cooling Methods for TCS foods

[There were a few food items that were cooling in the kitchen walk-in refrigerator. These items were made less than two hours earlier and were covered. Temps were between 73-76°F. When cooling foods, use one or more of the following acceptable methods based on the type of food being cooled: 1) Place food in shallow pans; 2) Separate food into smaller or thinner portions; 3) Use rapid cooling equipment such as ice wands, blast chillers; 4) Stir the food in a container placed in an ice water bath; 5) Use containers that facilitates the heat transfer; 6) Add ice as an ingredient, or other effective methods. Arrange the food in the equipment to provide maximum heat transfer through the container walls. Avoid covering foods until they are thoroughly cooled. Try to use the top shelf in the walk-in refrigerators for cooling. Cooked TCS Foods shall be cooled: 1) Within two (2) hours from 135°F to 70°F; and 2) within total of six (6) hours from 135°F to 41°F or less. If items are prepared from ambient temperatures such as tuna fish, cool to 41°F within four (4) hours or less.

Large food items, such as roast, turkeys, and large containers of rice or refried beans, take longer to cool because of the mass and volume form which heat must be removed. By reducing the volume of the food in an individual container, the rate of cooling is dramatically increased and opportunity for pathogen growth is minimized. If the hot food container is tightly covered, the rate of heat transfer is reduced. Commercial refrigeration equipment is designed to hold cold food temperatures, not cool large masses of food. Rapid chilling equipment is designed to cool the food to acceptable temperatures quickly by using very low temperatures and high rates of air circulation.]

33B. Frozen food

☒ ☐ ☐ ☐

*D. K. Kneel*

Inspector

Acknowledged Receipt : Rachel Oppenheimer

Page 6 of 11

## Food Establishment Inspection Report - FDA

### Food Temperature Control

	IN	OUT	N/O	N/A	COS	REPEAT
34. Plant food properly cooked for hot holding	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
35. Approved thawing methods used	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
36A. Thermometers provided and accurate	<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>
36B. Thermometers function properly	<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>

### Food Identification

	IN	OUT	COS	REPEAT
37A. Food properly labeled; original container	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
37B. Food labels, labeling of ingredients	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

### Prevention of Food Contamination

	IN	OUT	COS	REPEAT
38A. Insects, rodents, & animals not present	<input type="radio"/>	<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

#### Fail Notes

6-202.15

#### Outer Openings, Protected

[A door was observed opened that lead to a hallway used by students. Keep door closed. As a suggestion, put the automatic door closer back on. ]

6-501.111 (A, B, D)

#### \*Controlling Pests

[There were a lot of flies observed by the ware washing area. The premises shall be maintained free of insects, rodents, and other pests. The presence of insects, rodents, and other pests shall be controlled to eliminate their presence on the premises by routinely inspecting incoming shipments of food and supplies; inspecting the premises for evidence of pests; using methods, if pests are found, such as trapping devices etc.; and eliminate harborage conditions.]

38B. Handling prohibition, controlling pests, prohibiting animals	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
39A. Contamination prevented during food storage	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
39B. Food display; ice used as an exterior coolant prohibited as an ingredient	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
39C. Consumer self-service operations- utensils and monitoring	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
40A. Personal cleanliness- prohibition jewelry	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
40B. Maintenance of fingernails	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
41. Wiping cloths; properly used and stored	<input type="radio"/>	<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>



Inspector

Acknowledged Receipt : Rachel Oppenheimer

Page 7 of 11

# Food Establishment Inspection Report - FDA

Prevention of Food Contamination

IN OUT COS REPEAT

Fail Notes 3-304.14

## Wiping Cloths, Use Limitation

[Numerous wiping cloths were observed being stored on prep tables and equipment. Wiping cloths in-use for wiping counters and other equipment surfaces shall be held between uses in a chemical sanitizer solution at a concentration specified by the manufacturer (read the label). Wiping cloths used for surfaces in contact with raw animal foods shall be kept separate from cloths used for other purposes. Containers of chemical sanitizing solution in which wet wiping cloths are held between uses shall be stored off the floor and used in a manner that prevents contamination of food, equipment, utensils, linens, and single-service items (to-go containers). If a surface needs to be wipe from crumbs or ingredients (not allergens or raw meats - to remove allergens, soapy water MUST be used) use a disposable paper towel. Use once and dispose. Avoid using wiping cloths under cutting boards and to cover foods. Instead use a non-slip mat under the cutting boards. Using a paper towel is acceptable to use to cover food however plastic wrap is recommended.

Soiled wiping cloths, especially when moist, can become breeding grounds for pathogens that could be transferred to food. Wiping cloths soiled with organic material can overcome the effectiveness of, and neutralize, the sanitizer. The sanitizing solution must be changed as needed to minimize the accumulation of organic material and sustain proper concentration. Proper sanitizer concentration should be ensured by checking the solution periodically with an appropriate chemical test kit. ]

42A. Washing Produce - following chemical manufacturers label

☒ ☐ ☐ ☐

42B. Washing produce

☒ ☐ ☐ ☐

42C. Washing produce- chemicals

☒ ☐ ☐ ☐

Proper Use of Utensils

IN OUT COS REPEAT

43. In-use utensils; properly stored

☐ ☒ ☐ ☒

*Dan Kneel*

Inspector

Acknowledged Receipt : Rachel Oppenheimer

Page 8 of 11

# Food Establishment Inspection Report - FDA

Proper Use of Utensils

IN OUT COS REPEAT

Fail Notes 3-304.12

## In-Use Utensils, Between-Use Storage

[The ice scoop in the elementary prep area was observed in the ice. Store scoop handle above the ice or in its holder. Some scoops at the salad bar was observed in the food product. Ensure that an employee monitors the salad bar and scoops. During pauses in food preparation, store the dispensing utensil in one of the following approved manners: In the food with the handle above the top of the food and container / or in equipment that can be closed such as bins of sugar etc., on a clean portion of the food preparation table or cooking equipment only if the equipment is cleaned and sanitized at least every four (4) hours, In running water of sufficient velocity to flush particulates to the drain, In a clean, protected location if the utensil such as an ice scoop are used with non TCS foods, or In a container of water if the water is maintained at 135°F and above. Do not use ice water. Do not store knives wedged between equipment. Avoid using containers and equipment without handles. Use utensils with handles instead.

Once a food employee begins to use a utensil such as a ladle, spatula, knife, that has been previously cleaned and sanitize, it is considered an in-use utensil. In use utensil, used on a continuous or intermittent basis during preparation or dispensing, must be cleaned and sanitized on a schedule that precludes the growth of pathogens that may have been introduced onto utensil surfaces. In-use utensils may be safely stored in hot water maintained at 135°F or above during intermittent use because microbial growth is controlled at such temperatures. ]

44. Utensils, equipment & linens; properly stored, dried, and handled

☐ ☒ ☐ ☐

Fail Notes

4-903.11 (A-B & D)

## Equipment, Utensils, Linens and Single-Service and Single-Use Articles-Storing

[Not all single-use items (to go / disposable) were observed stored upside down in the kitchen and elementary prep area. Plastic cups at the water dispenser were observed facing up. Ensure that they are inverted. Single-service and single-use items shall be stored in a clean, dry location; where they are not exposed to splash, dust, or other contamination; and at least 6 inches above the floor and kept in the original protective package or stored by using other means that afford protection from contamination. Since single-use items are not designed to be cleaned and re-used; therefore, they must be properly stored and protected to prevent from possible contamination.]

45A. Single-use/ single service articles properly stored and used, required

☒ ☐ ☐ ☐

45B. Single-use/service articles use limitation, kitchenware and tableware preventing contamination

☒ ☐ ☐ ☐

46. Gloves used properly

☒ ☐ ☐ ☐

## Utensils, Equipment and Vending

IN OUT COS REPEAT

47A. Food & non-food contact surfaces cleanable

☒ ☐ ☐ ☐

47B. Food contact surfaces /utensils cleanability, molluscan shellfish tanks, consumer self-service

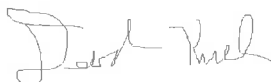
☒ ☐ ☐ ☐

47C. Properly designed characteristics: food and non-food contact surfaces, molluscan shellfish tanks

☒ ☐ ☐ ☐

48A. Warewashing facilities: installed, maintained, & used; test strips

☒ ☐ ☐ ☐



Inspector

Acknowledged Receipt : Rachel Oppenheimer

Page 9 of 11

# Food Establishment Inspection Report - FDA

Utensils, Equipment and Vending		IN	OUT	COS	REPEAT
48B. Operational warewashing machines		⊙	○	□	□
49. Non-food contact surfaces clean		○	⊙	□	□
Fail Notes	4-601.11 (B&C) *Equipment, Food-Contact Surfaces, Nonfood-Contact Surfaces, and Utensils [Numerous gaskets on refrigeration units were observed dirty. Clean. Nonfood-contact surfaces of equipment shall be kept free of an accumulation of dust, dirt, food residue, and other debris.]				

Physical Facilities		IN	OUT	N/A	COS	REPEAT
50. Hot & cold water available; adequate pressure		⊙	○		□	□
51A. Plumbing installed; proper backflow devices		⊙	○		□	□
51B. Prohibiting a cross-connection, inspection and servicing system		⊙	○		□	□
51C. Approved system and cleanable fixtures, service sink		⊙	○	○	□	□
52A. Sewage and waste water properly disposed		⊙	○		□	□
52B. Grease traps easily accessible for cleaning		⊙	○		□	□
52C. Removing mobile food establishment waste		○	○	⊙	□	□
53A. Toilet facilities; properly constructed, supplied, & cleaned		⊙	○		□	□
53B. Toilet tissue availability		⊙	○		□	□
54. Garbage & refuse properly disposed; facilities maintained		⊙	○		□	□
55A. Physical facilities installed, maintained, & clean		○	⊙		□	□
Fail Notes	6-501.11 Repairing-Premises, Structures, Attachments, and Fixtures-Methods [The walkin refrigerator had water on the ground. If there is a leak then repair it and wipe up the water. A piece of the cove base was observed in disrepair by the walkin. Physical facilities shall be maintained in good repair.]  6-501.113 Storing maintenance tools; brooms and mops [Brooms were observed being stored by the handsink in the elementary prep area. Maintenance tools such as brooms, mops, vacuum cleaners, and similar items shall be stored so they do not contaminate food, equipment, utensils, linens, and single-use items and in an orderly manner that facilitates cleaning the area used for storing the maintenance tools.]  6-501.114 Maintaining Premises, Unnecessary Items and Litter [There was a bin of food equipment in the kitchen that is no longer used. The premises shall be free of items that are unnecessary to the operation or maintenance of the establishment such as equipment that is nonfunctional or no longer used; and litter. The presence of unnecessary items including equipment which is no longer used makes regular and effective cleaning more difficult and less likely. It can also provide harborage for insects and rodents.]					



Inspector

Acknowledged Receipt : Rachel Oppenheimer

Page 10 of 11

## Food Establishment Inspection Report - FDA

### Physical Facilities

IN OUT N/A COS REPEAT

Fail Notes 6-501.12

#### Cleaning, Frequency and Restrictions

[The walkin ceiling was observed dirty. There was grease on the floor under the hood by the burger station. This was left there from when the hood was cleaned. After cleaning the hood, clean the grease that is left on the ground afterwards. The physical facilities shall be cleaned as often as necessary to keep them clean. Cleaning the physical facilities is an important measure in ensuring the protection and sanitary preparation of food. A regular cleaning schedule should be established and followed to maintain the facility in a clean and sanitary manner. Primary cleaning should be done at times when foods are in protected storage and when food is not being served or prepared.]

55B. Private homes and living or sleeping quarters, use prohibition

☒ ☐ ☐ ☐

56. Adequate ventilation & lighting; designated areas used

☒ ☐ ☐ ☐

### MASSACHUSETTS ONLY REGULATIONS

Rules and Regulations adopted for use in Massachusetts only.

#### Facilities

IN OUT COS REPEAT

57A. Catering

☐ ☐ ☐ ☐

57B. When plans are reviewed, prerequisite for operations- valid permit

☐ ☐ ☐ ☐

57C. Contents of plans and specifications, preoperational inspections

☐ ☐ ☐ ☐

58. Mobile Food Operations

☐ ☐ ☐ ☐

59. Temporary Food Establishments

☐ ☐ ☐ ☐

60. Residential Kitchens

☐ ☐ ☐ ☐

#### Procedures

IN OUT COS REPEAT

61. Anti-choking Procedures

☒ ☐ ☐ ☐

62. Tobacco Products: Notice and Sale

☐ ☐ ☐ ☐

63. Food Allergy Awareness Requirements

☒ ☐ ☐ ☐



Inspector

Acknowledged Receipt : Rachel Oppenheimer

Page 11 of 11



**City of Newton**  
**Health and Human Services**  
 Deborah Youngblood, PhD, Commissioner  
 1000 Commonwealth Ave Newton, MA 02459  
 (617) 796-1420



**Public Health**  
 Prevent. Promote. Protect.

**Food Establishment Inspection Report - FDA**

**Insp Date:** 10/17/2018    **Business ID:** 1N2272  
**Business:** Newton North High School  
 457 Walnut St.

Newton, MA 02460

**Inspection:** AN000355  
**Section:** 4  
**Phone:** 617-559-6327  
**Inspector:** 07311992 Brianne Gray  
**Reason:** 1-Routine  
**Results:** No Follow-up R2

**Inspection Summary**

Official Order for Correction: Based on an inspection today, the items checked indicate violations of 105 CMR 590.000/ 2013 Federal Food Code. This report, when signed below by the Commissioner of Health / Agent constitutes an order by the Commissioner of Health. Failure to correct violations cited in this report may result in suspension or revocation of the food establishment permit and cessation of food establishment operations. If aggrieved by this order, you have the right to a hearing. The request must be in writing and submitted to the Commissioner of Health at the above address within 10 days of receipt of this order.

Est. Type 1 - Food Svc Establis License/Permit # \_\_\_\_\_ Risk Category 02 Risk Level Observed 02 Low

Foodborne Illness Complaint Investigated (All) ☐ Involving More Than Two Persons ☐

**FOODBORNE ILLNESS RISK FACTORS AND PUBLIC HEALTH INTERVENTIONS**

Compliance status: IN = in compliance OUT = not in compliance N/O = not observed N/A = not applicable

Marked in appropriate box for COS and/or R. COS = corrected on-site during inspection R = repeat violation

Risk factors are improper practices or procedures identified as the most prevalent contributing factors of foodborne illness or injury. Public Health Interventions are control measures to prevent foodborne illnesses or injury.

**Supervision**

1. PIC Present, Knowledge and Duties

IN	OUT	N/O	N/A	COS	REPEAT
⊙	○			□	□

2. Certified Food Protection Manager

⊙	○		○	□	□
---	---	--	---	---	---

**Employee Health / Responding to Contamination Events**

3A. Employee Health: PIC Knowledge, Responsibilities & Reporting

IN	OUT	N/O	N/A	COS	REPEAT
⊙	○			□	□

3B. Employee Reporting to PIC

⊙	○			□	□
---	---	--	--	---	---

4. Proper Use of Restriction & Exclusion

⊙	○			□	□
---	---	--	--	---	---

5. Clean-up of Vomiting and Diarrheal Events

⊙	○			□	□
---	---	--	--	---	---

**Good Hygienic Practices**

6A. Proper eating, tasting, drinking, or tobacco use

IN	OUT	N/O	N/A	COS	REPEAT
⊙	○	○		□	□

6B. Preventing contamination when tasting

⊙	○	○		□	□
---	---	---	--	---	---

*Brianne Gray*

Inspector

Acknowledged Receipt :

Page 1 of 7

## Food Establishment Inspection Report - FDA

### Good Hygienic Practices

7. No discharge from eyes, nose, and mouth

IN	OUT	N/O	N/A	COS	REPEAT
<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>

### Control of Hands as a Vehicle of Contamination

8A. Hands clean & properly washed

IN	OUT	N/O	N/A	COS	REPEAT
<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>

8B. Where to wash, hand antiseptics

IN	OUT	N/O	N/A	COS	REPEAT
<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>

9. No bare hand contact with RTE food or a pre-approved alternative procedure properly allowed

IN	OUT	N/O	N/A	COS	REPEAT
<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

10A. Adequate handwashing sinks properly supplied and accessible

IN	OUT	N/O	N/A	COS	REPEAT
<input type="radio"/>	<input checked="" type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>

**Fail Notes**

5-202.12 (A) *Handwashing sink, installation- temperature/ mixing/ combo*  
*[No hot water was observed at the two front handwashing sinks or the sink in the snack bar. A handwashing sink shall be equipped to provide water at a temperature of at least 100°F through a mixing valve or combination faucet.]*

5-205.11 *Accessibility, Operation and Maintenance*  
*[The handwashing sink by the 3-bay sink was blocked by a trash barrel. A hand washing sink shall be maintained so that it is accessible at all times for employee use. A hand washing sink may not be used for purposes other than handwashing. Facilities must be maintained in a condition that promotes handwashing and restricted for that use. Convenient accessibility of a handwashing facility encourages timely handwashing which provides a break in the chain of contamination from the hands of food employees to food or food-contact surfaces. Sinks used for food preparation and ware washing can become sources of contamination if used as handwashing facilities by employees returning from the toilet or from duties which have contaminated their hands.]*

10B. Handwashing sinks accesible with proper signage, handwashing aids

IN	OUT	N/O	N/A	COS	REPEAT
<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>

### Approved Sources

11A. Milk, eggs, juice, bottled water, hermetically sealed food, game animals

IN	OUT	N/O	N/A	COS	REPEAT
<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

11B. Packaged foods, labeling, whole muscle beef

IN	OUT	N/O	N/A	COS	REPEAT
<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

11C. Obtaining raw fish, packaged meat & poultry, eggs

IN	OUT	N/O	N/A	COS	REPEAT
<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

12A. Food received at proper temperature

IN	OUT	N/O	N/A	COS	REPEAT
<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

12B. Shipping and receiving frozen food

IN	OUT	N/O	N/A	COS	REPEAT
<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

13. Food in good condition, honestly presented, safe, & unadulterated

IN	OUT	N/O	N/A	COS	REPEAT
<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>

13B. Food package integrity

IN	OUT	N/O	N/A	COS	REPEAT
<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>

14A. Required records available: shellstock tags, parasite destruction

IN	OUT	N/O	N/A	COS	REPEAT
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

14B. Missing shellstock tags, destruction

IN	OUT	N/O	N/A	COS	REPEAT
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

14C. Parasite destruction- storing raw/partially cooked fish

IN	OUT	N/O	N/A	COS	REPEAT
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

### Protection from Contamination

15A. Food separated & protected

IN	OUT	N/O	N/A	COS	REPEAT
<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

*Buame Day*

Inspector

Acknowledged Receipt :

Page 2 of 7

## Food Establishment Inspection Report - FDA

Protection from Contamination			IN	OUT	N/O	N/A	COS	REPEAT
15B. Cleaning equip/utensils/food containers			<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
16A. Food-contact surfaces: cleaned & sanitized immersion 171° F and above			<input type="radio"/>	<input checked="" type="radio"/>		<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
Fail Notes	4-703.11	<i>*Methods of Sanitization - Hot Water and Chemical [Employee was observed dipping pans into sanitizing solution, not getting proper contact time. Food contact surfaces such as prep tables, equipment and utensils must remain in the sanitizing solution for a period stated on the chemical manufacturer label in order to sufficiently destroy pathogens that may remain on surfaces after cleaning.]</i>						
16B. Food contact surfaces cleaned and sanitized NMT 194° F, NLT 180° F			<input type="radio"/>	<input checked="" type="radio"/>		<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
Fail Notes	4-601.11 (A)	<i>*Equipment, Food-Contact Surfaces, and Utensils Clean [Slicer observed dirty. Equipment food-contact surfaces and utensils shall be clean to sight and touch. Food contact surfaces shall be cleaned to remove organic matter so that sanitization can occur.]</i>						
16C. Mechanical warewashing equipment sanitization food contact surfaces, equip., utensils			<input checked="" type="radio"/>	<input type="radio"/>		<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
17. Proper disposition of returned, previously served reconditions, & unsafe food			<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>
Time/Temperature Control for Safety Food (TCS Food)			IN	OUT	N/O	N/A	COS	REPEAT
18A. Proper cooking time & temperatures			<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
18B. Whole meat cooking and serving, storing			<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
18C. Microwave cooking of raw animal foods			<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
19. Proper reheating procedures for hot holding			<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
20. Proper cooling time & temperatures			<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
21. Proper hot holding temperatures			<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
22. Proper cold holding temperatures			<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
Fail Notes	3-501.16(A2 &B)	<i>*Cold PHFs Maintained at or Below 41oF- also pertains to untreated eggs (45F) [Sliced tomato and cut leafy greens on the line by the steam table were observed at 50°F. The sliced tomato was stored on top of a large package of cheese instead of in the ice. Fruit cups with an expiration date of 10/23 were observed at 53°F. Maintain the internal temperature of TCS Foods at 41°F or below.]</i>						
23. Proper Date Marking			<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
23B. TCS Foods Disposition			<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
24A. Time as a public health control: procedures			<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
24B. Time as a public health control: temperatures & discarding food			<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
24C. Time as a public health control: highly susceptible population (HSP)			<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
Consumer Advisory			IN	OUT	N/O	N/A	COS	REPEAT
25. Consumer advisory provided for raw or undercooked foods			<input type="radio"/>	<input type="radio"/>		<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

*Buanna Day*

Inspector

Acknowledged Receipt :

Page 3 of 7

## Food Establishment Inspection Report - FDA

### Highly Susceptible Populations (HSP)

26A. Pasteurized foods used; prohibited foods not offered

IN OUT N/O N/A COS REPEAT

☐ ☐ ☐ ☐ ☐

26B. Reservice of foods

☐ ☐ ☐ ☐ ☐

### Chemical

27. Food additives: approved and properly used

☐ ☐ ☐ ☐ ☐

28A. Toxic substances identified, stored and used

☒ ☐ ☐ ☐ ☐

28B. Poisonous materials, sanitizers, additives, medicines restriction, separation, storage

☐ ☒ ☐ ☐ ☐

Fail Notes

7-201.11

*\*Separation - Storage*

*(Red sanitizer bucket was observed stored on the pizza prep table next to the cutting board. Poisonous or toxic materials (chemicals) shall be stored so they cannot contaminate food, equipment, utensils, linens, and single-use items by: (A) Separating by spacing or partitioning, and (B) Locating the poisonous or toxic materials (chemicals) in an area that is not above food, equipment, utensils, linens, and single-use items. This does not apply to equipment and utensil cleaners and sanitizers that are stored in ware washing areas for availability and convenience if the materials are stored to prevent contamination of food, equipment, utensils, linens, and single-use items.)*

28C. Conditions of Use: law

☒ ☐ ☐ ☐ ☐

### Conformance with Approved Procedures

29A. Compliance with variance, specialized process, & HACCP plan

☐ ☐ ☐ ☐ ☐

29B. Treating juice- HACCP, reduced oxygen packaging w/out variance, conformance with approved procedures

☐ ☐ ☐ ☐ ☐

29C. When HACCP plan is required

☐ ☐ ☐ ☐ ☐

### GOOD RETAIL PRACTICES

Good Retail Practices are preventative measures to control the addition of pathogens, chemicals, and physical objects into foods.

IN = In compliance OUT = not in compliance COS - corrected on -site during inspection REPEAT = repeat violation

### Safe Food and Water

30. Pasteurized eggs used where required

IN OUT N/O N/A COS REPEAT

☒ ☐ ☐ ☐ ☐

31A. Water & ice from approved source

☒ ☐ ☐ ☐ ☐

31B. Sampling, alternative water supply

☐ ☐ ☐ ☐ ☐

31C. Sampling report

☐ ☐ ☐ ☐ ☐

32. Variance obtained for specialized processing methods

☐ ☐ ☐ ☐ ☐

### Food Temperature Control

33A. Proper cooling methods used; adequate equipment for temperature control

IN OUT N/O N/A COS REPEAT

☐ ☒ ☐ ☐ ☐

*Buame Day*

Inspector

Acknowledged Receipt :

Page 4 of 7

# Food Establishment Inspection Report - FDA

## Food Temperature Control

IN OUT N/O N/A COS REPEAT

### Fail Notes

3-501.15 (A)

#### Cooling Methods for TCS foods

[Observed mac & cheese (71°F), veggies (71°F), and noodles (108°F) cooling in the walk-in freezer with plastic wrap on them. The corners of the plastic wrap was pulled up. When cooling foods, use one or more of the following acceptable methods based on the type of food being cooled: 1) Place food in shallow pans; 2) Separate food into smaller or thinner portions; 3) Use rapid cooling equipment such ice wands, blast chillers; 4) Stir the food in a container placed in an ice water bath; 5) Use containers that facilitates the heat transfer; 6) Add ice as an ingredient, or other effective methods. Arrange the food in the equipment to provide maximum heat transfer through the container walls. Avoid covering foods until they are thoroughly cooled. Try to use the top shelf in the walk-in refrigerators for cooling. Cooked TCS Foods shall be cooled: 1) Within two (2) hours from 135°F to 70°F; and 2) within total of six (6) hours from 135°F to 41°F or less. If items are prepared from ambient temperatures such as tuna fish, cool to 41°F within four (4) hours or less.

Large food items, such as roast, turkeys, and large containers of rice or refried beans, take longer to cool because of the mass and volume form which heat must be removed. By reducing the volume of the food in an individual container, the rate of cooling is dramatically increased and opportunity for pathogen growth is minimized. If the hot food container is tightly covered, the rate of heat transfer is reduced. Commercial refrigeration equipment is designed to hold cold food temperatures, not cool large masses of food. Rapid chilling equipment is designed to cool the food to acceptable temperatures quickly by using very low temperatures and high rates of air circulation.

]

33B. Frozen food

⊙ ○ □ □

34. Plant food properly cooked for hot holding

⊙ ○ ○ ○ □ □

35. Approved thawing methods used

○ ○ ⊙ ○ □ □

36A. Thermometers provided and accurate

⊙ ○ □ □

36B. Thermometers function properly

⊙ ○ □ □

## Food Identification

37A. Food properly labeled; original container

⊙ ○ □ □

37B. Food labels, labeling of ingredients

⊙ ○ □ □

## Prevention of Food Contamination

38A. Insects, rodents, & animals not present

⊙ ○ □ □

38B. Handling prohibition, controlling pests, prohibiting animals

⊙ ○ □ □

39A. Contamination prevented during food storage

⊙ ○ □ □

39B. Food display; ice used as an exterior coolant prohibited as an ingredient

⊙ ○ □ □

Buamne Day

Inspector

Acknowledged Receipt :

Page 5 of 7

## Food Establishment Inspection Report - FDA

Prevention of Food Contamination			IN	OUT	COS	REPEAT	
39C.	Consumer self-service operations- utensils and monitoring		<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>	
40A.	Personal cleanliness- prohibition jewelry		<input type="radio"/>	<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>	
<i>Fail Notes</i>	<div style="border-left: 1px solid black; padding-left: 10px;"> <b>2-303.11 Prohibition-Jewelry</b>  <i>[Wrist jewelry was observed on employees. Except for a plain ring such as a wedding band, while preparing food, food employees may not wear jewelry including medical information jewelry on their arms and hands.]</i> </div>						
40B.	Maintenance of fingernails		<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>	
41.	Wiping cloths; properly used and stored		<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>	
42A.	Washing Produce - following chemical manufacturers label		<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>	
42B.	Washing produce		<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>	
42C.	Washing produce- chemicals		<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Proper Use of Utensils			IN	OUT	COS	REPEAT	
43.	In-use utensils; properly stored		<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>	
44.	Utensils, equipment & linens; properly stored, dried, and handled		<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>	
45A.	Single-use/ single service articles properly stored and used, required		<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>	
45B.	Single-use/service articles use limitation, kitchenware and tableware preventing contamination		<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>	
46.	Gloves used properly		<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Utensils, Equipment and Vending			IN	OUT	COS	REPEAT	
47A.	Food & non-food contact surfaces cleanable		<input type="radio"/>	<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>	
<i>Fail Notes</i>	<div style="border-left: 1px solid black; padding-left: 10px;"> <b>4-501.11 Good repair and proper adjustment</b>  <i>[The temperature dials and ecolab screen did not match what was actually happening on the dishmachine. The template says the wash cycle is 38 seconds but the actual cycle was a lot longer. Have the dishmachine checked.</i>  <i>The paper towel dispenser by the front handwashing sink was observed broken. Repair.</i>  <i>The small slicer was observed broken. Replace.]</i> </div>						
47B.	Food contact surfaces /utensils cleanability, molluscan shellfish tanks, consumer self-service		<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>	
47C.	Properly designed characteristics: food and non-food contact surfaces, molluscan shellfish tanks		<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>	
48A.	Warewashing facilities: installed, maintained, & used; test strips		<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>	
48B.	Operational warewashing machines		<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>	
49.	Non-food contact surfaces clean		<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Physical Facilities			IN	OUT	N/A	COS	REPEAT
50.	Hot & cold water available; adequate pressure		<input checked="" type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>
51A.	Plumbing installed; proper backflow devices		<input checked="" type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>
51B.	Prohibiting a cross-connection, inspection and servicing system		<input checked="" type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>

*Buame Day*

Inspector

Acknowledged Receipt :

Page 6 of 7

## Food Establishment Inspection Report - FDA

### Physical Facilities

	IN	OUT	N/A	COS	REPEAT
51C. Approved system and cleanable fixtures, service sink	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
52A. Sewage and waste water properly disposed	<input checked="" type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>
52B. Grease traps easily accessible for cleaning	<input checked="" type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>
52C. Removing mobile food establishment waste	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
53A. Toilet facilities; properly constructed, supplied, & cleaned	<input checked="" type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>
53B. Toilet tissue availability	<input checked="" type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>
54. Garbage & refuse properly disposed; facilities maintained	<input checked="" type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>
55A. Physical facilities installed, maintained, & clean	<input checked="" type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>
55B. Private homes and living or sleeping quarters, use prohibition	<input checked="" type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>
56. Adequate ventilation & lighting; designated areas used	<input checked="" type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>

### MASSACHUSETTS ONLY REGULATIONS

Rules and Regulations adopted for use in Massachusetts only.

### Facilities

	IN	OUT	COS	REPEAT
57A. Catering	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
57B. When plans are reviewed, prerequisite for operations- valid permit	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
57C. Contents of plans and specifications, preoperational inspections	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
58. Mobile Food Operations	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
59. Temporary Food Establishments	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
60. Residential Kitchens	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

### Procedures

	IN	OUT	COS	REPEAT
61. Anti-choking Procedures	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
62. Tobacco Products: Notice and Sale	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
63. Food Allergy Awareness Requirements	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

*Buanne Day*

Inspector

Acknowledged Receipt :

Page 7 of 7



City of Newton  
Health and Human Services  
Deborah Youngblood, PhD, Commissioner  
1000 Commonwealth Ave Newton, MA 02459  
(617) 796-1420



Public Health  
Prevent. Promote. Protect.

Food Establishment Inspection Report - FDA

Insp Date: 6/10/2019 Business ID: 1N2272  
Business: Newton North High School  
457 Walnut St.

Newton, MA 02460

Inspection: 6N000136  
Section: 4  
Phone: 559-6327  
Inspector: 1N11123 Nicola Assan  
Reason: 1-Routine  
Results: No Follow-up R2

Inspection Summary

Official Order for Correction: Based on an inspection today, the items checked indicate violations of 105 CMR 590.000/ 2013 Federal Food Code. This report, when signed below by the Commissioner of Health / Agent constitutes an order by the Commissioner of Health. Failure to correct violations cited in this report may result in suspension or revocation of the food establishment permit and cessation of food establishment operations. If aggrieved by this order, you have the right to a hearing. The request must be in writing and submitted to the Commissioner of Health at the above address within 10 days of receipt of this order.

Est. Type 1 - Food Svc Establis License/Permit # \_\_\_\_\_ Risk Category 02 Risk Level Observed 02 Low

Foodborne Illness Complaint Investigated (All) ☐ Involving More Than Two Persons ☐

FOODBORNE ILLNESS RISK FACTORS AND PUBLIC HEALTH INTERVENTIONS

Compliance status: IN = in compliance OUT = not in compliance N/O = not observed N/A = not applicable

Marked in appropriate box for COS and/or R. COS = corrected on-site during inspection R = repeat violation

Risk factors are improper practices or procedures identified as the most prevalent contributing factors of foodborne illness or injury. Public Health Interventions are control measures to prevent foodborne illnesses or injury.

Supervision

1. PIC Present, Knowledge and Duties

IN	OUT	N/O	N/A	COS	REPEAT
<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>

2. Certified Food Protection Manager

<input checked="" type="radio"/>	<input type="radio"/>		<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
----------------------------------	-----------------------	--	-----------------------	--------------------------	--------------------------

Employee Health / Responding to Contamination Events

3A. Employee Health: PIC Knowledge, Responsibilities & Reporting

IN	OUT	N/O	N/A	COS	REPEAT
<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>

3B. Employee Reporting to PIC

<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>
----------------------------------	-----------------------	--	--	--------------------------	--------------------------

4. Proper Use of Restriction & Exclusion

<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>
----------------------------------	-----------------------	--	--	--------------------------	--------------------------

5. Clean-up of Vomiting and Diarrheal Events

<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>
----------------------------------	-----------------------	--	--	--------------------------	--------------------------

Good Hygienic Practices

6A. Proper eating, tasting, drinking, or tobacco use

IN	OUT	N/O	N/A	COS	REPEAT
<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>

6B. Preventing contamination when tasting

<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>
----------------------------------	-----------------------	-----------------------	--	--------------------------	--------------------------

Inspector

Acknowledged Receipt : Tim Viveiros

Page 1 of 6

## Food Establishment Inspection Report - FDA

### Good Hygienic Practices

7. No discharge from eyes, nose, and mouth

IN	OUT	N/O	N/A	COS	REPEAT
<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>

### Control of Hands as a Vehicle of Contamination

8A. Hands clean & properly washed

IN	OUT	N/O	N/A	COS	REPEAT
<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>

8B. Where to wash, hand antiseptics

IN	OUT	N/O	N/A	COS	REPEAT
<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>

9. No bare hand contact with RTE food or a pre-approved alternative procedure properly allowed

IN	OUT	N/O	N/A	COS	REPEAT
<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

10A. Adequate handwashing sinks properly supplied and accessible

IN	OUT	N/O	N/A	COS	REPEAT
<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>

10B. Handwashing sinks accessible with proper signage, handwashing aids

IN	OUT	N/O	N/A	COS	REPEAT
<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>

### Approved Sources

11A. Milk, eggs, juice, bottled water, hermetically sealed food, game animals

IN	OUT	N/O	N/A	COS	REPEAT
<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

11B. Packaged foods, labeling, whole muscle beef

IN	OUT	N/O	N/A	COS	REPEAT
<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

11C. Obtaining raw fish, packaged meat & poultry, eggs

IN	OUT	N/O	N/A	COS	REPEAT
<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

12A. Food received at proper temperature

IN	OUT	N/O	N/A	COS	REPEAT
<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

12B. Shipping and receiving frozen food

IN	OUT	N/O	N/A	COS	REPEAT
<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

13. Food in good condition, honestly presented, safe, & unadulterated

IN	OUT	N/O	N/A	COS	REPEAT
<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>

13B. Food package integrity

IN	OUT	N/O	N/A	COS	REPEAT
<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>

14A. Required records available: shellstock tags, parasite destruction

IN	OUT	N/O	N/A	COS	REPEAT
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

14B. Missing shellstock tags, destruction

IN	OUT	N/O	N/A	COS	REPEAT
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

14C. Parasite destruction- storing raw/partially cooked fish

IN	OUT	N/O	N/A	COS	REPEAT
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

### Protection from Contamination

15A. Food separated & protected

IN	OUT	N/O	N/A	COS	REPEAT
<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

15B. Cleaning equip/utensils/food containers

IN	OUT	N/O	N/A	COS	REPEAT
<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

16A. Food-contact surfaces: cleaned & sanitized immersion 171° F and above

IN	OUT	N/O	N/A	COS	REPEAT
<input checked="" type="radio"/>	<input type="radio"/>		<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

16B. Food contact surfaces cleaned and sanitized NMT 194° F, NLT 180° F

IN	OUT	N/O	N/A	COS	REPEAT
<input checked="" type="radio"/>	<input type="radio"/>		<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

16C. Mechanical warewashing equipment sanitization food contact surfaces, equip., utensils

IN	OUT	N/O	N/A	COS	REPEAT
<input checked="" type="radio"/>	<input type="radio"/>		<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

17. Proper disposition of returned, previously served reconditions, & unsafe food

IN	OUT	N/O	N/A	COS	REPEAT
<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>

### Time/Temperature Control for Safety Food (TCS Food)

18A. Proper cooking time & temperatures

IN	OUT	N/O	N/A	COS	REPEAT
<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

18B. Whole meat cooking and serving, storing

IN	OUT	N/O	N/A	COS	REPEAT
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

18C. Microwave cooking of raw animal foods

IN	OUT	N/O	N/A	COS	REPEAT
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

19. Proper reheating procedures for hot holding

IN	OUT	N/O	N/A	COS	REPEAT
<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

20. Proper cooling time & temperatures

IN	OUT	N/O	N/A	COS	REPEAT
<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

21. Proper hot holding temperatures

IN	OUT	N/O	N/A	COS	REPEAT
<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

Inspector

Acknowledged Receipt : Tim Viveiros

Page 2 of 6

## Food Establishment Inspection Report - FDA

### Time/Temperature Control for Safety Food (TCS Food)

22. Proper cold holding temperatures

Fail Notes

3-501.16(A2 &B)

*\*Cold PHFs Maintained at or Below 41oF- also pertains to untreated eggs (45F)  
[The temperature of the sliced tomatoes in the cold holding unit in the service area was 46.4 degrees F. Maintain an internal temperature of TCS foods at 41 degrees F or below.]*

IN OUT N/O N/A COS REPEAT  
☐ ☒ ☐ ☐ ☐ ☐

23. Proper Date Marking

☒ ☐ ☐ ☐ ☐ ☐

23B. TCS Foods Disposition

☒ ☐ ☐ ☐ ☐ ☐

24A. Time as a public health control: procedures

☐ ☐ ☐ ☒ ☐ ☐

24B. Time as a public health control: temperatures & discarding food

☐ ☐ ☐ ☒ ☐ ☐

24C. Time as a public health control: highly susceptible population (HSP)

☐ ☐ ☐ ☒ ☐ ☐

### Consumer Advisory

25. Consumer advisory provided for raw or undercooked foods

IN OUT N/O N/A COS REPEAT  
☐ ☐ ☐ ☒ ☐ ☐

### Highly Susceptible Populations (HSP)

26A. Pasteurized foods used; prohibited foods not offered

IN OUT N/O N/A COS REPEAT  
☐ ☐ ☐ ☒ ☐ ☐

26B. Reservice of foods

☐ ☐ ☐ ☒ ☐ ☐

### Chemical

27. Food additives: approved and properly used

IN OUT N/O N/A COS REPEAT  
☐ ☐ ☐ ☒ ☐ ☐

28A. Toxic substances identified, stored and used

☒ ☐ ☐ ☐ ☐ ☐

28B. Poisonous materials, sanitizers, additives, medicines restriction, separation, storage

☒ ☐ ☐ ☐ ☐ ☐

28C. Conditions of Use: law

☒ ☐ ☐ ☐ ☐ ☐

### Conformance with Approved Procedures

29A. Compliance with variance, specialized process, & HACCP plan

IN OUT N/O N/A COS REPEAT  
☐ ☐ ☐ ☒ ☐ ☐

29B. Treating juice- HACCP, reduced oxygen packaging w/out variance, conformance with approved procedures

☐ ☐ ☐ ☒ ☐ ☐

29C. When HACCP plan is required

☐ ☐ ☐ ☒ ☐ ☐

### GOOD RETAIL PRACTICES

Good Retail Practices are preventative measures to control the addition of pathogens, chemicals, and physical objects into foods.

IN = In compliance OUT = not in compliance COS - corrected on -site during inspection REPEAT = repeat violation

### Safe Food and Water

30. Pasteurized eggs used where required

IN OUT N/O N/A COS REPEAT  
☒ ☐ ☐ ☐ ☐ ☐

31A. Water & ice from approved source

☒ ☐ ☐ ☐ ☐ ☐

31B. Sampling, alternative water supply

☐ ☐ ☐ ☒ ☐ ☐

31C. Sampling report

☐ ☐ ☐ ☒ ☐ ☐

Inspector

Acknowledged Receipt : Tim Viveiros

Page 3 of 6

## Food Establishment Inspection Report - FDA

Safe Food and Water	IN	OUT	N/O	N/A	COS	REPEAT
32. Variance obtained for specialized processing methods	<input type="radio"/>	<input type="radio"/>		<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

Food Temperature Control	IN	OUT	N/O	N/A	COS	REPEAT
33A. Proper cooling methods used; adequate equipment for temperature control	<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>
33B. Frozen food	<input type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>
34. Plant food properly cooked for hot holding	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
35. Approved thawing methods used	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
36A. Thermometers provided and accurate	<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>
36B. Thermometers function properly	<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>

Food Identification	IN	OUT	COS	REPEAT
37A. Food properly labeled; original container		<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>
37B. Food labels, labeling of ingredients		<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>

Prevention of Food Contamination	IN	OUT	COS	REPEAT
38A. Insects, rodents, & animals not present	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
38B. Handling prohibition, controlling pests, prohibiting animals	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
39A. Contamination prevented during food storage	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
39B. Food display; ice used as an exterior coolant prohibited as an ingredient	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
39C. Consumer self-service operations- utensils and monitoring	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
40A. Personal cleanliness- prohibition jewelry	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
40B. Maintenance of fingernails	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
41. Wiping cloths; properly used and stored	<input type="radio"/>	<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
<div style="display: flex; align-items: flex-start;"> <div style="width: 15%; border-right: 1px solid black; padding-right: 5px;"> <b>Fail Notes</b> </div> <div style="width: 15%; padding-right: 5px;"> <b>3-304.14</b> </div> <div> <b>Wiping Cloths, Use Limitation</b>  <i>[Wiping cloths were observed being stored on the food prep tables. Cloths in-use for wiping counters and other equipment surfaces shall be held between uses in a chemical sanitizer solution at a concentration specified on the manufacturer's label.]</i> </div> </div>				
42A. Washing Produce - following chemical manufacturers label	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
42B. Washing produce	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
42C. Washing produce- chemicals	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

Proper Use of Utensils	IN	OUT	COS	REPEAT
43. In-use utensils; properly stored	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
44. Utensils, equipment & linens; properly stored, dried, and handled	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
45A. Single-use/ single service articles properly stored and used, required	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
45B. Single-use/service articles use limitation, kitchenware and tableware preventing contamination	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
46. Gloves used properly	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

*Asson*

Inspector

Acknowledged Receipt : Tim Viveiros

Page 4 of 6

## Food Establishment Inspection Report - FDA

### Utensils, Equipment and Vending

	IN	OUT	COS	REPEAT
47A. Food & non-food contact surfaces cleanable	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
47B. Food contact surfaces /utensils cleanability, molluscan shellfish tanks, consumer self-service	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
47C. Properly designed characteristics: food and non-food contact surfaces, molluscan shellfish tanks	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
48A. Warewashing facilities: installed, maintained, & used; test strips	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
48B. Operational warewashing machines	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
49. Non-food contact surfaces clean	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

### Physical Facilities

	IN	OUT	N/A	COS	REPEAT
50. Hot & cold water available; adequate pressure	<input checked="" type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>
51A. Plumbing installed; proper backflow devices	<input checked="" type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>
51B. Prohibiting a cross-connection, inspection and servicing system	<input checked="" type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>
51C. Approved system and cleanable fixtures, service sink	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
52A. Sewage and waste water properly disposed	<input checked="" type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>
52B. Grease traps easily accessible for cleaning	<input checked="" type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>
52C. Removing mobile food establishment waste	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
53A. Toilet facilities; properly constructed, supplied, & cleaned	<input checked="" type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>
53B. Toilet tissue availability	<input checked="" type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>
54. Garbage & refuse properly disposed; facilities maintained	<input checked="" type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>
55A. Physical facilities installed, maintained, & clean	<input checked="" type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>
55B. Private homes and living or sleeping quarters, use prohibition	<input checked="" type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>
56. Adequate ventilation & lighting; designated areas used	<input checked="" type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>

### MASSACHUSETTS ONLY REGULATIONS

Rules and Regulations adopted for use in Massachusetts only.

#### Facilities

	IN	OUT	COS	REPEAT
57A. Catering	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
57B. When plans are reviewed, prerequisite for operations- valid permit	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
57C. Contents of plans and specifications, preoperational inspections	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
58. Mobile Food Operations	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
59. Temporary Food Establishments	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
60. Residential Kitchens	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

#### Procedures

	IN	OUT	COS	REPEAT
61. Anti-choking Procedures	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
62. Tobacco Products: Notice and Sale	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

*Assess*

Inspector

Acknowledged Receipt : Tim Viveiros

Page 5 of 6

## Food Establishment Inspection Report - FDA

Procedures

63. Food Allergy Awareness Requirements

IN OUT COS REPEAT

☐ ☐ ☐ ☐

  
Inspector

Acknowledged Receipt : Tim Viveiros

Page 6 of 6



City of Newton  
Health and Human Services  
Deborah Youngblood, PhD, Commissioner  
1000 Commonwealth Ave Newton, MA 02459  
(617) 796-1420



Public Health  
Prevent. Promote. Protect.

Food Establishment Inspection Report - FDA

Insp Date: 10/25/2016 Business ID: 1N2331  
Business: Newton South High School  
140 Brandeis Rd.

Newton, MA 02459

Inspection: 4N000331  
Section: 2  
Phone: 617-559-6500  
Inspector: 4N11100 Kofi Appawu  
Reason: 1-Routine  
Results: No Follow-up R2

Inspection Summary

Official Order for Correction: Based on an inspection today, the items checked indicate violations of 105 CMR 590.000/ 2013 Federal Food Code. This report, when signed below by the Commissioner of Health / Agent constitutes an order by the Commissioner of Health. Failure to correct violations cited in this report may result in suspension or revocation of the food establishment permit and cessation of food establishment operations. If aggrieved by this order, you have the right to a hearing. The request must be in writing and submitted to the Commissioner of Health at the above address within 10 days of receipt of this order.

Est. Type 1 - Food Svc Establis License/Permit # \_\_\_\_\_ Risk Category 02 Risk Level Observed 02 Low

Foodborne Illness Complaint Investigated (All) ☐ Involving More Than Two Persons ☐

FOODBORNE ILLNESS RISK FACTORS AND PUBLIC HEALTH INTERVENTIONS

Compliance status: IN = in compliance OUT = not in compliance N/O = not observed N/A = not applicable

Marked in appropriate box for COS and/or R. COS = corrected on-site during inspection R = repeat violation

Risk factors are improper practices or procedures identified as the most prevalent contributing factors of foodborne illness or injury. Public Health Interventions are control measures to prevent foodborne illnesses or injury.

Supervision

- 1. PIC Present, Knowledge and Duties
- 2. Certified Food Protection Manager

IN	OUT	N/O	N/A	COS	REPEAT
<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>
<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>

Employee Health / Responding to Contamination Events

- 3A. Employee Health: PIC Knowledge, Responsibilities & Reporting
- 3B. Employee Reporting to PIC
- 4. Proper Use of Restriction & Exclusion
- 5. Clean-up of Vomiting and Diarrheal Events

IN	OUT	N/O	N/A	COS	REPEAT
<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>
<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>
<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>
<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>

Good Hygienic Practices

- 6A. Proper eating, tasting, drinking, or tobacco use
- 6B. Preventing contamination when tasting

IN	OUT	N/O	N/A	COS	REPEAT
<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>
<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>

MPH

Inspector

Acknowledged Receipt : Maria Mastroianni

Page 1 of 6

## Food Establishment Inspection Report - FDA

Good Hygienic Practices	IN	OUT	N/O	N/A	COS	REPEAT
7. No discharge from eyes, nose, and mouth	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>

Control of Hands as a Vehicle of Contamination	IN	OUT	N/O	N/A	COS	REPEAT
8A. Hands clean & properly washed	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>
8B. Where to wash, hand antiseptics	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>
9. No bare hand contact with RTE food or a pre-approved alternative procedure properly allowed	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
10A. Adequate handwashing sinks properly supplied and accessible	<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>
10B. Handwashing sinks accesible with proper signage, handwashing aids	<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>

Approved Sources	IN	OUT	N/O	N/A	COS	REPEAT
11A. Milk, eggs, juice, bottled water, hermetically sealed food, game animals	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
11B. Packaged foods, labeling, whole muscle beef	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
11C. Obtaining raw fish, packaged meat & poultry, eggs	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
12A. Food received at proper temperature	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
12B. Shipping and receiving frozen food	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
13. Food in good condition, honestly presented, safe, & unadulterated	<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>
13B. Food package integrity	<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>
14A. Required records available: shellstock tags, parasite destruction	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
14B. Missing shellstock tags, destruction	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
14C. Parasite destruction- storing raw/partially cooked fish	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

Protection from Contamination	IN	OUT	N/O	N/A	COS	REPEAT
15A. Food separated & protected	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
15B. Cleaning equip/utensils/food containers	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
16A. Food-contact surfaces: cleaned & sanitized immersion 171° F and above	<input checked="" type="radio"/>	<input type="radio"/>		<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
16B. Food contact surfaces cleaned and sanitized NMT 194° F, NLT 180° F	<input checked="" type="radio"/>	<input type="radio"/>		<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
16C. Mechanical warewashing equipment sanitization food contact surfaces, equip., utensils	<input checked="" type="radio"/>	<input type="radio"/>		<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
17. Proper disposition of returned, previously served reconditions, & unsafe food	<input type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>

Time/Temperature Control for Safety Food (TCS Food)	IN	OUT	N/O	N/A	COS	REPEAT
18A. Proper cooking time & temperatures	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
18B. Whole meat cooking and serving, storing	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
18C. Microwave cooking of raw animal foods	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
19. Proper reheating procedures for hot holding	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
20. Proper cooling time & temperatures	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
21. Proper hot holding temperatures	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

MPH

Inspector

Acknowledged Receipt : Maria Mastroianni

Page 2 of 6

## Food Establishment Inspection Report - FDA

Time/Temperature Control for Safety Food (TCS Food)	IN	OUT	N/O	N/A	COS	REPEAT
---	----	-----	-----	-----	-----	--------

22. Proper cold holding temperatures

☐ ☒ ☐ ☐ ☐ ☐

Fail Notes 3-501.16(A2 &B)

*\*Cold PHFs Maintained at or Below 41oF- also pertains to untreated eggs (45F)  
[Sandwich wraps were in the temperature range of 48-50F. In discussion with the person in charge it was determined that they were all gone ( served) within 3 hours after being made. Cold potentially hazardous foods should be maintained at or below 41F.]*

23. Proper Date Marking

☒ ☐ ☐ ☐ ☐ ☐

23B. TCS Foods Disposition

☐ ☐ ☐ ☐ ☐ ☐

24A. Time as a public health control: procedures

☐ ☐ ☐ ☒ ☐ ☐

24B. Time as a public health control: temperatures & discarding food

☐ ☐ ☐ ☒ ☐ ☐

24C. Time as a public health control: highly susceptible population (HSP)

☐ ☐ ☐ ☒ ☐ ☐

Consumer Advisory

IN OUT N/O N/A COS REPEAT

25. Consumer advisory provided for raw or undercooked foods

☐ ☐ ☐ ☒ ☐ ☐

Highly Susceptible Populations (HSP)

IN OUT N/O N/A COS REPEAT

26A. Pasteurized foods used; prohibited foods not offered

☐ ☐ ☐ ☒ ☐ ☐

26B. Reservice of foods

☐ ☐ ☐ ☒ ☐ ☐

Chemical

IN OUT N/O N/A COS REPEAT

27. Food additives: approved and properly used

☐ ☐ ☐ ☒ ☐ ☐

28A. Toxic substances identified, stored and used

☒ ☐ ☐ ☐ ☐ ☐

28B. Poisonous materials, sanitizers, additives, medicines restriction, separation, storage

☒ ☐ ☐ ☐ ☐ ☐

28C. Conditions of Use: law

☒ ☐ ☐ ☐ ☐ ☐

Conformance with Approved Procedures

IN OUT N/O N/A COS REPEAT

29A. Compliance with variance, specialized process, & HACCP plan

☐ ☐ ☐ ☒ ☐ ☐

29B. Treating juice- HACCP, reduced oxygen packaging w/out variance, conformance with approved procedures

☐ ☐ ☐ ☒ ☐ ☐

29C. When HACCP plan is required

☐ ☐ ☐ ☒ ☐ ☐

### GOOD RETAIL PRACTICES

Good Retail Practices are preventative measures to control the addition of pathogens, chemicals, and physical objects into foods.

IN = In compliance OUT = not in compliance COS - corrected on -site during inspection REPEAT = repeat violation

Safe Food and Water

IN OUT N/O N/A COS REPEAT

30. Pasteurized eggs used where required

☐ ☐ ☐ ☐ ☐ ☐

31A. Water & ice from approved source

☒ ☐ ☐ ☐ ☐ ☐

31B. Sampling, alternative water supply

☐ ☐ ☐ ☒ ☐ ☐

 MPH

Inspector

Acknowledged Receipt : Maria Mastroianni

Page 3 of 6

## Food Establishment Inspection Report - FDA

Safe Food and Water	IN	OUT	N/O	N/A	COS	REPEAT
---------------------	----	-----	-----	-----	-----	--------

31C. Sampling report

☐ IN   ☐ OUT   ☐ N/O   ☐ N/A   ☐ COS   ☐ REPEAT

32. Variance obtained for specialized processing methods

☐ IN   ☐ OUT   ☐ N/O   ☐ N/A   ☐ COS   ☐ REPEAT

Food Temperature Control	IN	OUT	N/O	N/A	COS	REPEAT
--------------------------	----	-----	-----	-----	-----	--------

33A. Proper cooling methods used; adequate equipment for temperature control

☒ IN   ☐ OUT   ☐ N/O   ☐ N/A   ☐ COS   ☐ REPEAT

33B. Frozen food

☒ IN   ☐ OUT   ☐ N/O   ☐ N/A   ☐ COS   ☐ REPEAT

34. Plant food properly cooked for hot holding

☐ IN   ☐ OUT   ☐ N/O   ☒ N/A   ☐ COS   ☐ REPEAT

35. Approved thawing methods used

☐ IN   ☐ OUT   ☒ N/O   ☐ N/A   ☐ COS   ☐ REPEAT

36A. Thermometers provided and accurate

☒ IN   ☐ OUT   ☐ N/O   ☐ N/A   ☐ COS   ☐ REPEAT

36B. Thermometers function properly

☒ IN   ☐ OUT   ☐ N/O   ☐ N/A   ☐ COS   ☐ REPEAT

Food Identification	IN	OUT	COS	REPEAT
---------------------	----	-----	-----	--------

37A. Food properly labeled; original container

☒ IN   ☐ OUT   ☐ COS   ☐ REPEAT

37B. Food labels, labeling of ingredients

☐ IN   ☒ OUT   ☐ COS   ☐ REPEAT

Fail Notes	3-602.11 (B5)	<i>*Labeling of major food allergen [Fruit cups and pudding did not have any labeling of food ingredients. Provide labeling with list of ingredients and sub ingredients for fruit cups/Pudding ]</i>
------------	---------------	---

Prevention of Food Contamination	IN	OUT	COS	REPEAT
----------------------------------	----	-----	-----	--------

38A. Insects, rodents, & animals not present

☒ IN   ☐ OUT   ☐ COS   ☐ REPEAT

38B. Handling prohibition, controlling pests, prohibiting animals

☒ IN   ☐ OUT   ☐ COS   ☐ REPEAT

39A. Contamination prevented during food storage

☒ IN   ☐ OUT   ☐ COS   ☐ REPEAT

39B. Food display; ice used as an exterior coolant prohibited as an ingredient

☒ IN   ☐ OUT   ☐ COS   ☐ REPEAT

39C. Consumer self-service operations- utensils and monitoring

☒ IN   ☐ OUT   ☐ COS   ☐ REPEAT

40A. Personal cleanliness- prohibition jewelry

☒ IN   ☐ OUT   ☐ COS   ☐ REPEAT

40B. Maintenance of fingernails

☒ IN   ☐ OUT   ☐ COS   ☐ REPEAT

41. Wiping cloths; properly used and stored

☒ IN   ☐ OUT   ☐ COS   ☐ REPEAT

42A. Washing Produce - following chemical manufacturers label

☐ IN   ☐ OUT   ☐ COS   ☐ REPEAT

42B. Washing produce

☒ IN   ☐ OUT   ☐ COS   ☐ REPEAT

42C. Washing produce- chemicals

☐ IN   ☐ OUT   ☐ COS   ☐ REPEAT

Proper Use of Utensils	IN	OUT	COS	REPEAT
------------------------	----	-----	-----	--------

43. In-use utensils; properly stored

☒ IN   ☐ OUT   ☐ COS   ☐ REPEAT

44. Utensils, equipment & linens; properly stored, dried, and handled

☒ IN   ☐ OUT   ☐ COS   ☐ REPEAT

45A. Single-use/ single service articles properly stored and used, required

☒ IN   ☐ OUT   ☐ COS   ☐ REPEAT

45B. Single-use/service articles use limitation, kitchenware and tableware preventing contamination

☒ IN   ☐ OUT   ☐ COS   ☐ REPEAT

46. Gloves used properly

☒ IN   ☐ OUT   ☐ COS   ☐ REPEAT

MPH

Inspector

Acknowledged Receipt : Maria Mastroianni

Page 4 of 6

## Food Establishment Inspection Report - FDA

### Utensils, Equipment and Vending

	IN	OUT	COS	REPEAT
47A. Food & non-food contact surfaces cleanable	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
47B. Food contact surfaces /utensils cleanability, molluscan shellfish tanks, consumer self-service	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
47C. Properly designed characteristics: food and non-food contact surfaces, molluscan shellfish tanks	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
48A. Warewashing facilities: installed, maintained, & used; test strips	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
48B. Operational warewashing machines	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
49. Non-food contact surfaces clean	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

### Physical Facilities

	IN	OUT	N/A	COS	REPEAT
50. Hot & cold water available; adequate pressure	<input checked="" type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>
51A. Plumbing installed; proper backflow devices	<input checked="" type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>
51B. Prohibiting a cross-connection, inspection and servicing system	<input checked="" type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>
51C. Approved system and cleanable fixtures, service sink	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
52A. Sewage and waste water properly disposed	<input checked="" type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>
52B. Grease traps easily accessible for cleaning	<input checked="" type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>
52C. Removing mobile food establishment waste	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
53A. Toilet facilities; properly constructed, supplied, & cleaned	<input checked="" type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>
53B. Toilet tissue availability	<input checked="" type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>
54. Garbage & refuse properly disposed; facilities maintained	<input checked="" type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>
55A. Physical facilities installed, maintained, & clean	<input checked="" type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>
55B. Private homes and living or sleeping quarters, use prohibition	<input checked="" type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>
56. Adequate ventilation & lighting; designated areas used	<input checked="" type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>

### MASSACHUSETTS ONLY REGULATIONS

Rules and Regulations adopted for use in Massachusetts only.

### Facilities

	IN	OUT	COS	REPEAT
57A. Catering	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
57B. When plans are reviewed, prerequisite for operations- valid permit	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
57C. Contents of plans and specifications, preoperational inspections	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
58. Mobile Food Operations	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
59. Temporary Food Establishments	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
60. Residential Kitchens	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

### Procedures

	IN	OUT	COS	REPEAT
61. Anti-choking Procedures	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
62. Tobacco Products: Notice and Sale	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

 MPH

Inspector

Acknowledged Receipt : Maria Mastroianni

Page 5 of 6

## Food Establishment Inspection Report - FDA

Procedures

IN OUT COS REPEAT

63. Food Allergy Awareness Requirements

☒ ☐ ☐ ☐

 MPH

Inspector

Acknowledged Receipt : Maria Mastroianni

Page 6 of 6



**City of Newton**  
**Health and Human Services**  
 Deborah Youngblood, PhD, Commissioner  
 1000 Commonwealth Ave Newton, MA 02459  
 (617) 796-1420



**Public Health**  
 Prevent. Promote. Protect.

**Food Establishment Inspection Report - FDA**

**Insp Date:** 11/28/2017    **Business ID:** 1N2331  
**Business:** Newton South High School  
 140 Brandeis Rd.

Newton, MA 02459

**Inspection:** 5N000359  
**Section:** 2  
**Phone:** 559-6500  
**Inspector:** 1N81219 Kyle Simpson  
**Reason:** 1-Routine  
**Results:** No Follow-up

**Inspection Summary**

Official Order for Correction: Based on an inspection today, the items checked indicate violations of 105 CMR 590.000/ 2009 Federal Food Code. This report, when signed below by the Commissioner of Health / Agent constitutes an order by the Commissioner of Health. Failure to correct violations cited in this report may result in suspension or revocation of the food establishment permit and cessation of food establishment operations. If aggrieved by this order, you have the right to a hearing. The request must be in writing and submitted to the Commissioner of Health at the above address within 10 days of receipt of this order.

Est. Type 1 - Food Svc Establish License/Permit # \_\_\_\_\_ Risk Category 02 Risk Level Observed 02 Low

**FOODBORNE ILLNESS RISK FACTORS AND PUBLIC HEALTH INTERVENTIONS**

Compliance status: IN = in compliance OUT = not in compliance N/O = not observed N/A = not applicable

Marked in appropriate box for COS and/or R. COS = corrected on-site during inspection R = repeat violation

Risk factors are improper practices or procedures identified as the most prevalent contributing factors of foodborne illness or injury. Public Health Interventions are control measures to prevent foodborne illnesses or injury.

**Supervision**

- 1A. PIC Present
- B. Cert. food manager, knowledge, no critical violations
- C. Duties of PIC

IN	OUT	N/O	N/A	COS	REPEAT
<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>
<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>
<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>

**Employee Health**

- 2. Management, food employee and conditional employee; knowledge, responsibilities and reporting
- 3. Proper use of restriction and exclusion

IN	OUT	N/O	N/A	COS	REPEAT
<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>

**Good Hygienic Practices**

- 4A. Proper eating, tasting, drinking, or tobacco use
- B. Preventing contamination when tasting
- 5. No discharge from eyes, nose, and mouth

IN	OUT	N/O	N/A	COS	REPEAT
<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>
<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>
<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>

*[Signature]*

Inspector

Acknowledged Receipt : Eveleen

Page 1 of 5

## Food Establishment Inspection Report - FDA

### Preventing Contamination by Hands

	IN	OUT	N/O	N/A	COS	REPEAT
6A. Hands clean & properly washed	⊙	○	○		□	□
B. Where to wash, hand antiseptics	⊙	○	○		□	□
7. No bare hand contact with RTE food or a pre-approved alternative procedure properly allowed	⊙	○	○	○	□	□
8A. Adequate handwashing sinks properly supplied and accessible	⊙	○			□	□
B. Handwashing sinks accessible with proper signage, handwashing aids	⊙	○			□	□
C. Conveniently located handwashing sink	⊙	○			□	□

### Approved Sources

	IN	OUT	N/O	N/A	COS	REPEAT
9A. Milk, eggs, juice, bottled water, hermetically sealed food	⊙	○			□	□
B. Fish and shellfish	○	○	○	⊙	□	□
10. Food received at proper temperature	○	○	⊙	○	□	□
11. Food in good condition, safe, & unadulterated	⊙	○			□	□

### Protection from Contamination

	IN	OUT	N/O	N/A	COS	REPEAT
12A. Food separated & protected	⊙	○	○	○	□	□
B. Gloves, use limitation, one task- contaminated	⊙	○	○	○	□	□
13A. Food-contact surfaces: cleaned & sanitized 171° F	○	⊙		○	□	□

*Fail Notes*    4-501.114    *Chemical Sanitization - Temperature, pH, Concentration and Hardness*  
*[The contact time of the sanitizer at the 3-bay sink was not adequate. The temperature in the dish machine did not get up to 160 when tested. Ensure that the contact time is at least 1 minute and the dish machine reaches at least 160 degrees. The person cleaning the dishes said she has to run the machine 3 times to ensure proper temperature. This should not happen.]*

B. Food contact surfaces cleaned and sanitized NMT 194° F, NLT 180° F	⊙	○		○	□	□
C. Mechanical warewashing equipment sanitization food contact surfaces, equip., utensils	⊙	○		○	□	□
14. Proper disposition of returned, previously served reconditions, & unsafe food	⊙	○			□	□

### Potentially Hazardous Food Time/Temperature

	IN	OUT	N/O	N/A	COS	REPEAT
15. Proper cooking time & temperatures	⊙	○	○	○	□	□
16. Proper reheating procedures for hot holding	⊙	○	○	○	□	□
17. Proper cooling time & temperatures	○	○	⊙	○	□	□
18. Proper hot holding temperatures	⊙	○	○	○	□	□
19. Proper cold holding temperatures	⊙	○	○	○	□	□
20. Time as a public health control: procedures & record	○	○	○	⊙	□	□

### Highly Susceptible Populations

	IN	OUT	N/O	N/A	COS	REPEAT
21. Pasteurized foods used; prohibited foods not offered	○	○		⊙	□	□

*Hyge*

Inspector

Acknowledged Receipt : Eveleen

Page 2 of 5

## Food Establishment Inspection Report - FDA

### Chemical

	IN	OUT	N/O	N/A	COS	REPEAT
22. Food additives: approved and properly used	<input type="radio"/>	<input type="radio"/>		<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
23A. Toxic substances properly identified, stored and used	<input checked="" type="radio"/>	<input type="radio"/>		<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
B. Restriction presence and use, restriction and storage of medicines	<input checked="" type="radio"/>	<input type="radio"/>		<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
C. Storage- other personal care items	<input checked="" type="radio"/>	<input type="radio"/>		<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

### GOOD RETAIL PRACTICES

Good Retail Practices are preventative measures to control the addition of pathogens, chemicals, and physical objects into foods.

IN = In compliance OUT = not in compliance COS - corrected on -site during inspection REPEAT = repeat violation

### Safe Food and Water

	IN	OUT	N/O	N/A	COS	REPEAT
24. Water & ice from approved source	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

### Food Temperature Control

	IN	OUT	N/O	N/A	COS	REPEAT
25A. Proper cooling methods used; adequate equipment for temperature control	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

Fail Notes 3-501.15

#### Cooling Methods for PHFs

[Foods are not being cooled completely before placing into cold holding units. Tuna was at 64 degrees, potatoes at 88, salami at 48, mayo at 63 and breaded chicken at 60 degrees. Back up foods were stored in the two door fridge covered tightly while cooling. Ensure that foods are cooled before placing into units and that when they are cooling they are not covering them tightly as the heat will not be able to escape.]

B. Frozen food	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
26. Plant food properly cooked for hot holding	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
27. Approved thawing methods used	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
28A. Thermometers provided and accurate	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
B. Thermometers function properly	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

### Food Identification

	IN	OUT	COS	REPEAT
29A. Food properly labeled; original container	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
B. Food labels, labeling of ingredients	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

### Prevention of Food Contamination

	IN	OUT	COS	REPEAT
30A. Insects, rodents, & animals not present	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
B. Handling prohibition, controlling pests, prohibiting animals	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
31A. Contamination prevented during food storage	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
B. Food display; ice used as an exterior coolant prohibited as an ingredient	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
C. Consumer self-service operations- utensils and monitoring	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
32A. Personal cleanliness- prohibition jewelry	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

*Hyle*

Inspector

Acknowledged Receipt : Eveleen

Page 3 of 5

## Food Establishment Inspection Report - FDA

Prevention of Food Contamination	IN	OUT	COS	REPEAT
----------------------------------	----	-----	-----	--------

- |   |   |   |   |   |
|---|---|---|---|---|
| B. Maintenance of fingernails               | ⊙ | ○ | □ | □ |
| 33. Wiping cloths; properly used and stored | ⊙ | ○ | □ | □ |
| 34. Washing fruits & vegetables             | ⊙ | ○ | □ | □ |

Proper Use of Utensils	IN	OUT	COS	REPEAT
------------------------	----	-----	-----	--------

- |   |   |   |   |   |
|---|---|---|---|---|
| 35. In-use utensils; properly stored  | ⊙ | ○ | □ | □ |
| 36. Utensils, equipment & linens; properly stored, dried, and handled                             | ⊙ | ○ | □ | □ |
| 37A. Single-use/ single service articles properly stored and used, required                       | ⊙ | ○ | □ | □ |
| B. Single-use/service articles use limitation, kitchenware and tableware preventing contamination | ⊙ | ○ | □ | □ |
| 38. Gloves used properly  | ⊙ | ○ | □ | □ |

Utensils, Equipment and Vending	IN	OUT	COS	REPEAT
---------------------------------	----	-----	-----	--------

- |   |   |   |   |   |
|---|---|---|---|---|
| 39A. Food & non-food contact surfaces cleanable   | ⊙ | ○ | □ | □ |
| B. Food contact surfaces /utensils cleanability, molluscan shellfish tanks, consumer self-servic    | ⊙ | ○ | □ | □ |
| C. Properly designed characteristics: food and non-food contact surfaces, molluscan shellfish tanks | ⊙ | ○ | □ | □ |
| 40A. Warewashing facilities: installed, maintained, & used; test strips                             | ⊙ | ○ | □ | □ |
| B. Operational warewashing machines   | ○ | ⊙ | □ | □ |

*Fail Notes*    4-302.13    *Temperature measuring devices, manual warewashing*  
*[Thermolabels were not available to test the dishmachine. Ensure that they are available and used regularly.]*

- |                                     |   |   |   |   |
|-------------------------------------|---|---|---|---|
| 41. Non-food contact surfaces clean | ⊙ | ○ | □ | □ |
|-------------------------------------|---|---|---|---|

Physical Facilities	IN	OUT	N/O	N/A	COS	REPEAT
---------------------	----	-----	-----	-----	-----	--------

- |   |   |   |  |  |   |   |
|---|---|---|--|--|---|---|
| 42. Hot & cold water available; adequate pressure                                       | ⊙ | ○ |  |  | □ | □ |
| 43A. Plumbing installed; proper backflow devices  | ⊙ | ○ |  |  | □ | □ |
| B. Prohibiting a cross-connection, non-drinking water, system maintained in good repair | ⊙ | ○ |  |  | □ | □ |
| C. Approved system and cleanable fixtures, service sink                                 | ⊙ | ○ |  |  | □ | □ |
| 44A. Sewage and waste water properly disposed   | ⊙ | ○ |  |  | □ | □ |
| B. Grease traps easily accessible for cleaning  | ⊙ | ○ |  |  | □ | □ |
| 45A. Toilet facilities; properly constructed, supplied, & cleaned                       | ⊙ | ○ |  |  | □ | □ |
| B. Toilet tissue availability   | ⊙ | ○ |  |  | □ | □ |
| 46. Garbage & refuse properly disposed; facilities maintained                           | ⊙ | ○ |  |  | □ | □ |
| 47A. Physical facilities installed, maintained, & clean                                 | ⊙ | ○ |  |  | □ | □ |
| B. Cleaning maintenance tools, preventing contamination                                 | ⊙ | ○ |  |  | □ | □ |
| 48. Adequate ventilation & lighting; designated areas used                              | ⊙ | ○ |  |  | □ | □ |

*Hyle*

Inspector

Acknowledged Receipt : Eveleen

Page 4 of 5

## Food Establishment Inspection Report - FDA

### MASSACHUSETTS ONLY REGULATIONS

Rules and Regulations adopted for use in Massachusetts only.

#### Facilities

49A. When plans are reviewed, prerequisite for operations- valid permit

IN OUT COS REPEAT

☐ ☐ ☐ ☐

B. Contents of plans and specifications, preoperational inspections

☐ ☐ ☐ ☐

#### Procedures


50. Anti-choking Procedures

IN OUT COS REPEAT

☒ ☐ ☐ ☐

51. Tobacco Products: Notice and Sale

☐ ☐ ☐ ☐

  
Inspector

Acknowledged Receipt : Eveleen

Page 5 of 5



City of Newton  
Health and Human Services  
Deborah Youngblood, PhD, Commissioner  
1000 Commonwealth Ave Newton, MA 02459  
(617) 796-1420



**Public Health**  
Prevent. Promote. Protect.

Food Establishment Inspection Report - FDA

**Insp Date:** 10/30/2018 **Business ID:** 1N2331

**Business:** Newton South High School  
140 Brandeis Rd.

Newton, MA 02459

**Inspection:** 6N000059

**Section:** 2

**Phone:** 559-6500

**Inspector:** 1N11123 Nicola Assan

**Reason:** 1-Routine

**Results:** No Follow-up R2

Inspection Summary

Official Order for Correction: Based on an inspection today, the items checked indicate violations of 105 CMR 590.000/ 2013 Federal Food Code. This report, when signed below by the Commissioner of Health / Agent constitutes an order by the Commissioner of Health. Failure to correct violations cited in this report may result in suspension or revocation of the food establishment permit and cessation of food establishment operations. If aggrieved by this order, you have the right to a hearing. The request must be in writing and submitted to the Commissioner of Health at the above address within 10 days of receipt of this order.

Est. Type 1 - Food Svc Establis License/Permit # \_\_\_\_\_ Risk Category 02 Risk Level Observed 02 Low

Foodborne Illness Complaint Investigated (All) ☐ Involving More Than Two Persons ☐

FOODBORNE ILLNESS RISK FACTORS AND PUBLIC HEALTH INTERVENTIONS

Compliance status: IN = in compliance OUT = not in compliance N/O = not observed N/A = not applicable

Marked in appropriate box for COS and/or R. COS = corrected on-site during inspection R = repeat violation

Risk factors are improper practices or procedures identified as the most prevalent contributing factors of foodborne illness or injury. Public Health Interventions are control measures to prevent foodborne illnesses or injury.

Supervision

1. PIC Present, Knowledge and Duties

IN	OUT	N/O	N/A	COS	REPEAT
<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>

2. Certified Food Protection Manager

<input checked="" type="radio"/>	<input type="radio"/>		<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
----------------------------------	-----------------------	--	-----------------------	--------------------------	--------------------------

Employee Health / Responding to Contamination Events

3A. Employee Health: PIC Knowledge, Responsibilities & Reporting

<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>
----------------------------------	-----------------------	--	--	--------------------------	--------------------------

3B. Employee Reporting to PIC

<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>
----------------------------------	-----------------------	--	--	--------------------------	--------------------------

4. Proper Use of Restriction & Exclusion

<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>
----------------------------------	-----------------------	--	--	--------------------------	--------------------------

5. Clean-up of Vomiting and Diarrheal Events

<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>
----------------------------------	-----------------------	--	--	--------------------------	--------------------------

Good Hygienic Practices

6A. Proper eating, tasting, drinking, or tobacco use

<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>
----------------------------------	-----------------------	-----------------------	--	--------------------------	--------------------------

6B. Preventing contamination when tasting

<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>
----------------------------------	-----------------------	-----------------------	--	--------------------------	--------------------------

*Assan*

Inspector

Acknowledged Receipt : Tim Viveiros

Page 1 of 6

## Food Establishment Inspection Report - FDA

### Good Hygienic Practices

7. No discharge from eyes, nose, and mouth

IN	OUT	N/O	N/A	COS	REPEAT
<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>

### Control of Hands as a Vehicle of Contamination

8A. Hands clean & properly washed

IN	OUT	N/O	N/A	COS	REPEAT
<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>

8B. Where to wash, hand antiseptics

IN	OUT	N/O	N/A	COS	REPEAT
<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>

9. No bare hand contact with RTE food or a pre-approved alternative procedure properly allowed

IN	OUT	N/O	N/A	COS	REPEAT
<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

10A. Adequate handwashing sinks properly supplied and accessible

IN	OUT	N/O	N/A	COS	REPEAT
<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>

10B. Handwashing sinks accessible with proper signage, handwashing aids

IN	OUT	N/O	N/A	COS	REPEAT
<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>

### Approved Sources

11A. Milk, eggs, juice, bottled water, hermetically sealed food, game animals

IN	OUT	N/O	N/A	COS	REPEAT
<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

11B. Packaged foods, labeling, whole muscle beef

IN	OUT	N/O	N/A	COS	REPEAT
<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

11C. Obtaining raw fish, packaged meat & poultry, eggs

IN	OUT	N/O	N/A	COS	REPEAT
<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

12A. Food received at proper temperature

IN	OUT	N/O	N/A	COS	REPEAT
<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

12B. Shipping and receiving frozen food

IN	OUT	N/O	N/A	COS	REPEAT
<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

13. Food in good condition, honestly presented, safe, & unadulterated

IN	OUT	N/O	N/A	COS	REPEAT
<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>

13B. Food package integrity

IN	OUT	N/O	N/A	COS	REPEAT
<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>

14A. Required records available: shellstock tags, parasite destruction

IN	OUT	N/O	N/A	COS	REPEAT
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

14B. Missing shellstock tags, destruction

IN	OUT	N/O	N/A	COS	REPEAT
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

14C. Parasite destruction- storing raw/partially cooked fish

IN	OUT	N/O	N/A	COS	REPEAT
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

### Protection from Contamination

15A. Food separated & protected

IN	OUT	N/O	N/A	COS	REPEAT
<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

15B. Cleaning equip/utensils/food containers

IN	OUT	N/O	N/A	COS	REPEAT
<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

16A. Food-contact surfaces: cleaned & sanitized immersion 171° F and above

IN	OUT	N/O	N/A	COS	REPEAT
<input type="radio"/>	<input checked="" type="radio"/>		<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

Fail Notes 4-501.114 (A-E, F 1&2)

*Chemical Sanitization - Temperature, pH, Concentration and Hardness  
[The concentration of the sanitizing solution in the red buckets was too strong (>400ppm). A chemical sanitizer used in a sanitizing solution for mechanical or manual operation shall be used in accordance with the EPA-registered label use instructions.]*

16B. Food contact surfaces cleaned and sanitized NMT 194° F, NLT 180° F

IN	OUT	N/O	N/A	COS	REPEAT
<input checked="" type="radio"/>	<input type="radio"/>		<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

16C. Mechanical warewashing equipment sanitization food contact surfaces, equip., utensils

IN	OUT	N/O	N/A	COS	REPEAT
<input checked="" type="radio"/>	<input type="radio"/>		<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

17. Proper disposition of returned, previously served reconditions, & unsafe food

IN	OUT	N/O	N/A	COS	REPEAT
<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>

### Time/Temperature Control for Safety Food (TCS Food)

18A. Proper cooking time & temperatures

IN	OUT	N/O	N/A	COS	REPEAT
<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

18B. Whole meat cooking and serving, storing

IN	OUT	N/O	N/A	COS	REPEAT
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

*Assou*

Inspector

Acknowledged Receipt : Tim Viveiros

Page 2 of 6

## Food Establishment Inspection Report - FDA

Time/Temperature Control for Safety Food (TCS Food)	IN	OUT	N/O	N/A	COS	REPEAT
18C. Microwave cooking of raw animal foods	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
19. Proper reheating procedures for hot holding	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
20. Proper cooling time & temperatures	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
21. Proper hot holding temperatures	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
22. Proper cold holding temperatures	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
23. Proper Date Marking	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

**Fail Notes**    3-501.17    *Date marking: RTE, TCS*  
*[Although there is a date marking system in place, indicating when food was prepared or opened and placed in the container and into the refrigerator, there is no indication of when the food should be discarded. You need to indicate when the food shall be consumed on the premises, sold or discarded.]*

23B. TCS Foods Disposition	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
24A. Time as a public health control: procedures	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
24B. Time as a public health control: temperatures & discarding food	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
24C. Time as a public health control: highly susceptible population (HSP)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

Consumer Advisory	IN	OUT	N/O	N/A	COS	REPEAT
25. Consumer advisory provided for raw or undercooked foods	<input type="radio"/>	<input type="radio"/>		<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

Highly Susceptible Populations (HSP)	IN	OUT	N/O	N/A	COS	REPEAT
26A. Pasteurized foods used; prohibited foods not offered	<input type="radio"/>	<input type="radio"/>		<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
26B. Reservice of foods	<input type="radio"/>	<input type="radio"/>		<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

Chemical	IN	OUT	N/O	N/A	COS	REPEAT
27. Food additives: approved and properly used	<input type="radio"/>	<input type="radio"/>		<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
28A. Toxic substances identified, stored and used	<input checked="" type="radio"/>	<input type="radio"/>		<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
28B. Poisonous materials, sanitizers, additives, medicines restriction, separation, storage	<input checked="" type="radio"/>	<input type="radio"/>		<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
28C. Conditions of Use: law	<input checked="" type="radio"/>	<input type="radio"/>		<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

Conformance with Approved Procedures	IN	OUT	N/O	N/A	COS	REPEAT
29A. Compliance with variance, specialized process, & HACCP plan	<input type="radio"/>	<input type="radio"/>		<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
29B. Treating juice- HACCP, reduced oxygen packaging w/out variance, conformance with approved procedures	<input type="radio"/>	<input type="radio"/>		<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
29C. When HACCP plan is required	<input type="radio"/>	<input type="radio"/>		<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

### GOOD RETAIL PRACTICES

Good Retail Practices are preventative measures to control the addition of pathogens, chemicals, and physical objects into foods.

IN = In compliance    OUT = not in compliance    COS - corrected on -site during inspection    REPEAT = repeat violation

*Mason*

Inspector

Acknowledged Receipt : Tim Viveiros

Page 3 of 6

## Food Establishment Inspection Report - FDA

Safe Food and Water	IN	OUT	N/O	N/A	COS	REPEAT
30. Pasteurized eggs used where required	<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>
31A. Water & ice from approved source	<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>
31B. Sampling, alternative water supply	<input type="radio"/>	<input type="radio"/>		<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
31C. Sampling report	<input type="radio"/>	<input type="radio"/>		<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
32. Variance obtained for specialized processing methods	<input type="radio"/>	<input type="radio"/>		<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

Food Temperature Control	IN	OUT	N/O	N/A	COS	REPEAT
33A. Proper cooling methods used; adequate equipment for temperature control	<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>
33B. Frozen food	<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>
34. Plant food properly cooked for hot holding	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
35. Approved thawing methods used	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
36A. Thermometers provided and accurate	<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>
36B. Thermometers function properly	<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>

Food Identification	IN	OUT	COS	REPEAT
37A. Food properly labeled; original container	<input type="radio"/>	<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

*Fail Notes* | 3-302.12 *Food Storage Containers Identified with Common Name of Food*  
*[Some of the salad dressings in the cold holding unit were not labeled.*  
*Working containers of food/ingredients that are removed from their*  
*original packages shall be identified with the common name of the food.*  
*Label all containers, bins and squeeze bottles.]*

37B. Food labels, labeling of ingredients ☒ ☐ ☐ ☐

Prevention of Food Contamination	IN	OUT	COS	REPEAT
38A. Insects, rodents, & animals not present	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
38B. Handling prohibition, controlling pests, prohibiting animals	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
39A. Contamination prevented during food storage	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
39B. Food display; ice used as an exterior coolant prohibited as an ingredient	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
39C. Consumer self-service operations- utensils and monitoring	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
40A. Personal cleanliness- prohibition jewelry	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
40B. Maintenance of fingernails	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
41. Wiping cloths; properly used and stored	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
42A. Washing Produce - following chemical manufacturers label	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
42B. Washing produce	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
42C. Washing produce- chemicals	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

Proper Use of Utensils	IN	OUT	COS	REPEAT
43. In-use utensils; properly stored	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
44. Utensils, equipment & linens; properly stored, dried, and handled	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

*Assou*

Inspector

Acknowledged Receipt : Tim Viveiros

Page 4 of 6

## Food Establishment Inspection Report - FDA

### Proper Use of Utensils

45A. Single-use/ single service articles properly stored and used, required

IN OUT COS REPEAT

☒ ☐ ☐ ☐

45B. Single-use/service articles use limitation, kitchenware and tableware preventing contamination

☒ ☐ ☐ ☐

46. Gloves used properly

☒ ☐ ☐ ☐

### Utensils, Equipment and Vending

47A. Food & non-food contact surfaces cleanable

☒ ☐ ☐ ☐

47B. Food contact surfaces /utensils cleanability, molluscan shellfish tanks, consumer self-service

☒ ☐ ☐ ☐

47C. Properly designed characteristics: food and non-food contact surfaces, molluscan shellfish tanks

☒ ☐ ☐ ☐

48A. Warewashing facilities: installed, maintained, & used; test strips

☒ ☐ ☐ ☐

48B. Operational warewashing machines

☒ ☐ ☐ ☐

49. Non-food contact surfaces clean

☒ ☐ ☐ ☐

### Physical Facilities

50. Hot & cold water available; adequate pressure

IN OUT N/A COS REPEAT

☒ ☐ ☐ ☐

51A. Plumbing installed; proper backflow devices

☒ ☐ ☐ ☐

51B. Prohibiting a cross-connection, inspection and servicing system

☒ ☐ ☐ ☐

51C. Approved system and cleanable fixtures, service sink

☒ ☐ ☐ ☐ ☐

52A. Sewage and waste water properly disposed

☒ ☐ ☐ ☐

52B. Grease traps easily accessible for cleaning

☒ ☐ ☐ ☐

52C. Removing mobile food establishment waste

☐ ☐ ☒ ☐ ☐

53A. Toilet facilities; properly constructed, supplied, & cleaned

☐ ☒ ☐ ☐

*Fail Notes* | 5-501.17 *Toilet room receptacle, covered- sanitary napkins*  
*[The receptacle for the disposal of sanitary napkins was not covered. A toilet room used by females shall be provided with a covered receptacle for sanitary napkins.]*

53B. Toilet tissue availability

☒ ☐ ☐ ☐

54. Garbage & refuse properly disposed; facilities maintained

☒ ☐ ☐ ☐

55A. Physical facilities installed, maintained, & clean

☒ ☐ ☐ ☐

55B. Private homes and living or sleeping quarters, use prohibition

☒ ☐ ☐ ☐

56. Adequate ventilation & lighting; designated areas used

☒ ☐ ☐ ☐

### MASSACHUSETTS ONLY REGULATIONS

Rules and Regulations adopted for use in Massachusetts only.

### Facilities

57A. Catering

IN OUT COS REPEAT

☐ ☐ ☐ ☐

57B. When plans are reviewed, prerequisite for operations- valid permit

☐ ☐ ☐ ☐

*Massa*

Inspector

Acknowledged Receipt : Tim Viveiros

Page 5 of 6

## Food Establishment Inspection Report - FDA

### Facilities

57C. Contents of plans and specifications, preoperational inspections

IN OUT COS REPEAT

☐ ☐ ☐ ☐

58. Mobile Food Operations

☐ ☐ ☐ ☐

59. Temporary Food Establishments

☐ ☐ ☐ ☐

60. Residential Kitchens

☐ ☐ ☐ ☐

### Procedures

61. Anti-choking Procedures

IN OUT COS REPEAT

☐ ☐ ☐ ☐

62. Tobacco Products: Notice and Sale

☐ ☐ ☐ ☐

63. Food Allergy Awareness Requirements

☐ ☐ ☐ ☐



Inspector

Acknowledged Receipt : Tim Viveiros

Page 6 of 6



City of Newton  
Health and Human Services  
Deborah Youngblood, PhD, Commissioner  
1000 Commonwealth Ave Newton, MA 02459  
(617) 796-1420



Public Health  
Prevent. Promote. Protect.

Food Establishment Inspection Report - FDA

Insp Date: 5/31/2019 Business ID: 1N2331  
Business: Newton South High School  
140 Brandeis Rd.

Newton, MA 02459

Inspection: 6N000127  
Section: 2  
Phone: 559-6500  
Inspector: 1N11123 Nicola Assan  
Reason: 1-Routine  
Results: No Follow-up R2

Inspection Summary

Official Order for Correction: Based on an inspection today, the items checked indicate violations of 105 CMR 590.000/ 2013 Federal Food Code. This report, when signed below by the Commissioner of Health / Agent constitutes an order by the Commissioner of Health. Failure to correct violations cited in this report may result in suspension or revocation of the food establishment permit and cessation of food establishment operations. If aggrieved by this order, you have the right to a hearing. The request must be in writing and submitted to the Commissioner of Health at the above address within 10 days of receipt of this order.

Est. Type 1 - Food Svc Establis License/Permit # \_\_\_\_\_ Risk Category 02 Risk Level Observed 02 Low

Foodborne Illness Complaint Investigated (All) ☐ Involving More Than Two Persons ☐

FOODBORNE ILLNESS RISK FACTORS AND PUBLIC HEALTH INTERVENTIONS

Compliance status: IN = in compliance OUT = not in compliance N/O = not observed N/A = not applicable

Marked in appropriate box for COS and/or R. COS = corrected on-site during inspection R = repeat violation

Risk factors are improper practices or procedures identified as the most prevalent contributing factors of foodborne illness or injury. Public Health Interventions are control measures to prevent foodborne illnesses or injury.

Supervision

1. PIC Present, Knowledge and Duties

IN	OUT	N/O	N/A	COS	REPEAT
<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>

2. Certified Food Protection Manager

<input checked="" type="radio"/>	<input type="radio"/>		<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
----------------------------------	-----------------------	--	-----------------------	--------------------------	--------------------------

Employee Health / Responding to Contamination Events

3A. Employee Health: PIC Knowledge, Responsibilities & Reporting

IN	OUT	N/O	N/A	COS	REPEAT
<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>

3B. Employee Reporting to PIC

<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>
----------------------------------	-----------------------	--	--	--------------------------	--------------------------

4. Proper Use of Restriction & Exclusion

<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>
----------------------------------	-----------------------	--	--	--------------------------	--------------------------

5. Clean-up of Vomiting and Diarrheal Events

<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>
----------------------------------	-----------------------	--	--	--------------------------	--------------------------

Good Hygienic Practices

6A. Proper eating, tasting, drinking, or tobacco use

IN	OUT	N/O	N/A	COS	REPEAT
<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>

6B. Preventing contamination when tasting

<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>
----------------------------------	-----------------------	-----------------------	--	--------------------------	--------------------------

Assan

Inspector

Acknowledged Receipt : Tim Viveiros

Page 1 of 6

## Food Establishment Inspection Report - FDA

### Good Hygienic Practices

7. No discharge from eyes, nose, and mouth

IN	OUT	N/O	N/A	COS	REPEAT
<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>

### Control of Hands as a Vehicle of Contamination

8A. Hands clean & properly washed

IN	OUT	N/O	N/A	COS	REPEAT
<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>

8B. Where to wash, hand antiseptics

IN	OUT	N/O	N/A	COS	REPEAT
<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>

9. No bare hand contact with RTE food or a pre-approved alternative procedure properly allowed

IN	OUT	N/O	N/A	COS	REPEAT
<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

10A. Adequate handwashing sinks properly supplied and accessible

IN	OUT	N/O	N/A	COS	REPEAT
<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>

10B. Handwashing sinks accessible with proper signage, handwashing aids

IN	OUT	N/O	N/A	COS	REPEAT
<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>

### Approved Sources

11A. Milk, eggs, juice, bottled water, hermetically sealed food, game animals

IN	OUT	N/O	N/A	COS	REPEAT
<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

11B. Packaged foods, labeling, whole muscle beef

IN	OUT	N/O	N/A	COS	REPEAT
<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

11C. Obtaining raw fish, packaged meat & poultry, eggs

IN	OUT	N/O	N/A	COS	REPEAT
<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

12A. Food received at proper temperature

IN	OUT	N/O	N/A	COS	REPEAT
<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

12B. Shipping and receiving frozen food

IN	OUT	N/O	N/A	COS	REPEAT
<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

13. Food in good condition, honestly presented, safe, & unadulterated

IN	OUT	N/O	N/A	COS	REPEAT
<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>

13B. Food package integrity

IN	OUT	N/O	N/A	COS	REPEAT
<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>

14A. Required records available: shellstock tags, parasite destruction

IN	OUT	N/O	N/A	COS	REPEAT
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

14B. Missing shellstock tags, destruction

IN	OUT	N/O	N/A	COS	REPEAT
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

14C. Parasite destruction- storing raw/partially cooked fish

IN	OUT	N/O	N/A	COS	REPEAT
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

### Protection from Contamination

15A. Food separated & protected

IN	OUT	N/O	N/A	COS	REPEAT
<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

15B. Cleaning equip/utensils/food containers

IN	OUT	N/O	N/A	COS	REPEAT
<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

16A. Food-contact surfaces: cleaned & sanitized immersion 171° F and above

IN	OUT	N/O	N/A	COS	REPEAT
<input checked="" type="radio"/>	<input type="radio"/>		<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

16B. Food contact surfaces cleaned and sanitized NMT 194° F, NLT 180° F

IN	OUT	N/O	N/A	COS	REPEAT
<input checked="" type="radio"/>	<input type="radio"/>		<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

16C. Mechanical warewashing equipment sanitization food contact surfaces, equip., utensils

IN	OUT	N/O	N/A	COS	REPEAT
<input checked="" type="radio"/>	<input type="radio"/>		<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

17. Proper disposition of returned, previously served reconditions, & unsafe food

IN	OUT	N/O	N/A	COS	REPEAT
<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>

### Time/Temperature Control for Safety Food (TCS Food)

18A. Proper cooking time & temperatures

IN	OUT	N/O	N/A	COS	REPEAT
<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

18B. Whole meat cooking and serving, storing

IN	OUT	N/O	N/A	COS	REPEAT
<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

18C. Microwave cooking of raw animal foods

IN	OUT	N/O	N/A	COS	REPEAT
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

19. Proper reheating procedures for hot holding

IN	OUT	N/O	N/A	COS	REPEAT
<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

20. Proper cooling time & temperatures

IN	OUT	N/O	N/A	COS	REPEAT
<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

21. Proper hot holding temperatures

IN	OUT	N/O	N/A	COS	REPEAT
<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

*Assan*

Inspector

Acknowledged Receipt : Tim Viveiros

Page 2 of 6

## Food Establishment Inspection Report - FDA

### Time/Temperature Control for Safety Food (TCS Food)

	IN	OUT	N/O	N/A	COS	REPEAT
22. Proper cold holding temperatures	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
23. Proper Date Marking	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
23B. TCS Foods Disposition	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
24A. Time as a public health control: procedures	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
24B. Time as a public health control: temperatures & discarding food	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
24C. Time as a public health control: highly susceptible population (HSP)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

### Consumer Advisory

	IN	OUT	N/O	N/A	COS	REPEAT
25. Consumer advisory provided for raw or undercooked foods	<input type="radio"/>	<input type="radio"/>		<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

### Highly Susceptible Populations (HSP)

	IN	OUT	N/O	N/A	COS	REPEAT
26A. Pasteurized foods used; prohibited foods not offered	<input type="radio"/>	<input type="radio"/>		<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
26B. Reservice of foods	<input type="radio"/>	<input type="radio"/>		<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

### Chemical

	IN	OUT	N/O	N/A	COS	REPEAT
27. Food additives: approved and properly used	<input type="radio"/>	<input type="radio"/>		<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
28A. Toxic substances identified, stored and used	<input checked="" type="radio"/>	<input type="radio"/>		<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
28B. Poisonous materials, sanitizers, additives, medicines restriction, separation, storage	<input checked="" type="radio"/>	<input type="radio"/>		<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
28C. Conditions of Use: law	<input checked="" type="radio"/>	<input type="radio"/>		<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

### Conformance with Approved Procedures

	IN	OUT	N/O	N/A	COS	REPEAT
29A. Compliance with variance, specialized process, & HACCP plan	<input type="radio"/>	<input type="radio"/>		<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
29B. Treating juice- HACCP, reduced oxygen packaging w/out variance, conformance with approved procedures	<input type="radio"/>	<input type="radio"/>		<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
29C. When HACCP plan is required	<input type="radio"/>	<input type="radio"/>		<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

### GOOD RETAIL PRACTICES

Good Retail Practices are preventative measures to control the addition of pathogens, chemicals, and physical objects into foods.

IN = In compliance    OUT = not in compliance    COS - corrected on -site during inspection    REPEAT = repeat violation

### Safe Food and Water

	IN	OUT	N/O	N/A	COS	REPEAT
30. Pasteurized eggs used where required	<input type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>
31A. Water & ice from approved source	<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>
31B. Sampling, alternative water supply	<input type="radio"/>	<input type="radio"/>		<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
31C. Sampling report	<input type="radio"/>	<input type="radio"/>		<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
32. Variance obtained for specialized processing methods	<input type="radio"/>	<input type="radio"/>		<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

### Food Temperature Control

	IN	OUT	N/O	N/A	COS	REPEAT
33A. Proper cooling methods used; adequate equipment for temperature control	<input type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>

*Mason*

Inspector

Acknowledged Receipt : Tim Viveiros

Page 3 of 6

## Food Establishment Inspection Report - FDA

Food Temperature Control	IN	OUT	N/O	N/A	COS	REPEAT
33B. Frozen food	<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>
34. Plant food properly cooked for hot holding	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
35. Approved thawing methods used	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
36A. Thermometers provided and accurate	<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>
36B. Thermometers function properly	<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>

Food Identification	IN	OUT	COS	REPEAT
37A. Food properly labeled; original container	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
37B. Food labels, labeling of ingredients	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

Prevention of Food Contamination	IN	OUT	COS	REPEAT
38A. Insects, rodents, & animals not present	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
38B. Handling prohibition, controlling pests, prohibiting animals	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
39A. Contamination prevented during food storage	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
39B. Food display; ice used as an exterior coolant prohibited as an ingredient	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
39C. Consumer self-service operations- utensils and monitoring	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
40A. Personal cleanliness- prohibition jewelry	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
40B. Maintenance of fingernails	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
41. Wiping cloths; properly used and stored	<input type="radio"/>	<input checked="" type="radio"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>

*Fail Notes*    3-304.14    *Wiping Cloths, Use Limitation*  
*[There were several wiping cloths being stored on the food preparation tables. Cloths in-use for wiping counters and other equipment surfaces shall be held between uses in a chemical sanitizer solution at a concentration specified on the manufacturer's label. The PIC threw all the cloths in the refuse during the inspection.]*

42A. Washing Produce - following chemical manufacturers label	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
42B. Washing produce	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
42C. Washing produce- chemicals	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

Proper Use of Utensils	IN	OUT	COS	REPEAT
43. In-use utensils; properly stored	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
44. Utensils, equipment & linens; properly stored, dried, and handled	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
45A. Single-use/ single service articles properly stored and used, required	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
45B. Single-use/service articles use limitation, kitchenware and tableware preventing contamination	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
46. Gloves used properly	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

Utensils, Equipment and Vending	IN	OUT	COS	REPEAT
47A. Food & non-food contact surfaces cleanable	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
47B. Food contact surfaces /utensils cleanability, molluscan shellfish tanks, consumer self-service	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

*Assan*

Inspector

Acknowledged Receipt : Tim Viveiros

Page 4 of 6

## Food Establishment Inspection Report - FDA

Utensils, Equipment and Vending	IN	OUT	COS	REPEAT
47C. Properly designed characteristics: food and non-food contact surfaces, molluscan shellfish tanks	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
48A. Warewashing facilities: installed, maintained, & used; test strips	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
<i><b>This item has Notes. See Footnote 1 at end of questionnaire.</b></i>				
48B. Operational warewashing machines	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
49. Non-food contact surfaces clean	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

Physical Facilities	IN	OUT	N/A	COS	REPEAT
50. Hot & cold water available; adequate pressure	<input checked="" type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>
51A. Plumbing installed; proper backflow devices	<input checked="" type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>
51B. Prohibiting a cross-connection, inspection and servicing system	<input checked="" type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>
51C. Approved system and cleanable fixtures, service sink	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
52A. Sewage and waste water properly disposed	<input checked="" type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>
52B. Grease traps easily accessible for cleaning	<input checked="" type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>
52C. Removing mobile food establishment waste	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
53A. Toilet facilities; properly constructed, supplied, & cleaned	<input checked="" type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>
53B. Toilet tissue availability	<input checked="" type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>
54. Garbage & refuse properly disposed; facilities maintained	<input checked="" type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>
55A. Physical facilities installed, maintained, & clean	<input checked="" type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>
55B. Private homes and living or sleeping quarters, use prohibition	<input checked="" type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>
56. Adequate ventilation & lighting; designated areas used	<input checked="" type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>

### MASSACHUSETTS ONLY REGULATIONS

Rules and Regulations adopted for use in Massachusetts only.

Facilities	IN	OUT	COS	REPEAT
57A. Catering	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
57B. When plans are reviewed, prerequisite for operations- valid permit	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
57C. Contents of plans and specifications, preoperational inspections	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
58. Mobile Food Operations	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
59. Temporary Food Establishments	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
60. Residential Kitchens	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

Procedures	IN	OUT	COS	REPEAT
61. Anti-choking Procedures	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
62. Tobacco Products: Notice and Sale	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
63. Food Allergy Awareness Requirements	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

Inspector

Acknowledged Receipt : Tim Viveiros

Page 5 of 6

## Food Establishment Inspection Report - FDA

### **Footnote 1**

#### **Notes:**

PIC informed me that she had ran out of thermocouples but not ordering any due to end of school year. She uses a thermometer to test dish washing machine.



Inspector

Acknowledged Receipt : Tim Viveiros

Page 6 of 6



City of Newton  
Health and Human Services  
Deborah Youngblood, PhD, Commissioner  
1000 Commonwealth Ave Newton, MA 02459  
(617) 796-1420



Public Health  
Prevent. Promote. Protect.

Food Establishment Inspection Report - FDA

Insp Date: 12/5/2017 Business ID: 1N2286

Business: Oak Hill Middle School  
130 Wheeler Rd.

Newton, MA 02459

Inspection: 6N000007

Section: 2

Phone: 617-559-9200

Inspector: 1N11123 Nicola Assan

Reason: 1-Routine

Results: No Follow-up R2

Inspection Summary

Official Order for Correction: Based on an inspection today, the items checked indicate violations of 105 CMR 590.000/ 2013 Federal Food Code. This report, when signed below by the Commissioner of Health / Agent constitutes an order by the Commissioner of Health. Failure to correct violations cited in this report may result in suspension or revocation of the food establishment permit and cessation of food establishment operations. If aggrieved by this order, you have the right to a hearing. The request must be in writing and submitted to the Commissioner of Health at the above address within 10 days of receipt of this order.

Est. Type 1 - Food Svc Establis License/Permit # \_\_\_\_\_ Risk Category 02 Risk Level Observed 02 Low

Foodborne Illness Complaint Investigated (All) ☐ Involving More Than Two Persons ☐

FOODBORNE ILLNESS RISK FACTORS AND PUBLIC HEALTH INTERVENTIONS

Compliance status: IN = in compliance OUT = not in compliance N/O = not observed N/A = not applicable

Marked in appropriate box for COS and/or R. COS = corrected on-site during inspection R = repeat violation

Risk factors are improper practices or procedures identified as the most prevalent contributing factors of foodborne illness or injury. Public Health Interventions are control measures to prevent foodborne illnesses or injury.

Supervision

1. PIC Present, Knowledge and Duties

IN	OUT	N/O	N/A	COS	REPEAT
<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>

2. Certified Food Protection Manager

<input type="radio"/>	<input checked="" type="radio"/>		<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
-----------------------	----------------------------------	--	-----------------------	--------------------------	--------------------------

*This item has Notes. See Footnote 1 at end of questionnaire.*

Employee Health / Responding to Contamination Events

3A. Employee Health: PIC Knowledge, Responsibilities & Reporting

<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>
----------------------------------	-----------------------	--	--	--------------------------	--------------------------

3B. Employee Reporting to PIC

<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>
----------------------------------	-----------------------	--	--	--------------------------	--------------------------

4. Proper Use of Restriction & Exclusion

<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>
----------------------------------	-----------------------	--	--	--------------------------	--------------------------

5. Clean-up of Vomiting and Diarrheal Events

<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>
----------------------------------	-----------------------	--	--	--------------------------	--------------------------

Good Hygienic Practices

6A. Proper eating, tasting, drinking, or tobacco use

IN	OUT	N/O	N/A	COS	REPEAT
<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>

6B. Preventing contamination when tasting

<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>
----------------------------------	-----------------------	-----------------------	--	--------------------------	--------------------------

Inspector

Acknowledged Receipt :

Page 1 of 7

## Food Establishment Inspection Report - FDA

### Good Hygienic Practices

7. No discharge from eyes, nose, and mouth

IN	OUT	N/O	N/A	COS	REPEAT
<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>

### Control of Hands as a Vehicle of Contamination

8A. Hands clean & properly washed

<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>
----------------------------------	-----------------------	-----------------------	--	--------------------------	--------------------------

8B. Where to wash, hand antiseptics

<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>
----------------------------------	-----------------------	-----------------------	--	--------------------------	--------------------------

9. No bare hand contact with RTE food or a pre-approved alternative procedure properly allowed

<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
----------------------------------	-----------------------	-----------------------	-----------------------	--------------------------	--------------------------

10A. Adequate handwashing sinks properly supplied and accessible

<input type="radio"/>	<input checked="" type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>
-----------------------	----------------------------------	--	--	--------------------------	--------------------------

#### Fail Notes

6-301.11

*Handwashing Cleanser, Availability*

*[There was no handwashing cleanser at the wash hand basin opposite the 3 bay sink area. Hand cleanser must always be present so as to reduce microorganisms and particulate matter found on hands.]*

6-301.12

*Hand Drying Provision*

*[The paper towel dispenser at the wash hand basin opposite the 3 bay sink area was empty. Provisions must be provided so that employees will not dry their hands on their clothing or other unclean materials.]*

10B. Handwashing sinks accessible with proper signage, handwashing aids

<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>
----------------------------------	-----------------------	--	--	--------------------------	--------------------------

### Approved Sources

11A. Milk, eggs, juice, bottled water, hermetically sealed food, game animals

<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
----------------------------------	-----------------------	-----------------------	-----------------------	--------------------------	--------------------------

11B. Packaged foods, labeling, whole muscle beef

<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
----------------------------------	-----------------------	-----------------------	-----------------------	--------------------------	--------------------------

11C. Obtaining raw fish, packaged meat & poultry, eggs

<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
----------------------------------	-----------------------	-----------------------	-----------------------	--------------------------	--------------------------

12A. Food received at proper temperature

<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
-----------------------	-----------------------	-----------------------	----------------------------------	--------------------------	--------------------------

12B. Shipping and receiving frozen food

<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
-----------------------	-----------------------	-----------------------	----------------------------------	--------------------------	--------------------------

13. Food in good condition, honestly presented, safe, & unadulterated

<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>
----------------------------------	-----------------------	--	--	--------------------------	--------------------------

13B. Food package integrity

<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>
----------------------------------	-----------------------	--	--	--------------------------	--------------------------

14A. Required records available: shellstock tags, parasite destruction

<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
-----------------------	-----------------------	-----------------------	----------------------------------	--------------------------	--------------------------

14B. Missing shellstock tags, destruction

<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
-----------------------	-----------------------	-----------------------	----------------------------------	--------------------------	--------------------------

14C. Parasite destruction- storing raw/partially cooked fish

<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
-----------------------	-----------------------	-----------------------	----------------------------------	--------------------------	--------------------------

### Protection from Contamination

15A. Food separated & protected

<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
----------------------------------	-----------------------	-----------------------	-----------------------	--------------------------	--------------------------

15B. Cleaning equip/utensils/food containers

<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
----------------------------------	-----------------------	-----------------------	-----------------------	--------------------------	--------------------------

16A. Food-contact surfaces: cleaned & sanitized immersion 171° F and above

<input checked="" type="radio"/>	<input type="radio"/>		<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
----------------------------------	-----------------------	--	-----------------------	--------------------------	--------------------------

16B. Food contact surfaces cleaned and sanitized NMT 194° F, NLT 180° F

<input checked="" type="radio"/>	<input type="radio"/>		<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
----------------------------------	-----------------------	--	-----------------------	--------------------------	--------------------------

16C. Mechanical warewashing equipment sanitization food contact surfaces, equip., utensils

<input checked="" type="radio"/>	<input type="radio"/>		<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
----------------------------------	-----------------------	--	-----------------------	--------------------------	--------------------------

17. Proper disposition of returned, previously served reconditions, & unsafe food

<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>
----------------------------------	-----------------------	--	--	--------------------------	--------------------------

### Time/Temperature Control for Safety Food (TCS Food)

IN	OUT	N/O	N/A	COS	REPEAT
----	-----	-----	-----	-----	--------

Inspector

Acknowledged Receipt :

Page 2 of 7

## Food Establishment Inspection Report - FDA

### Time/Temperature Control for Safety Food (TCS Food)

	IN	OUT	N/O	N/A	COS	REPEAT
18A. Proper cooking time & temperatures	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
18B. Whole meat cooking and serving, storing	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
18C. Microwave cooking of raw animal foods	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
19. Proper reheating procedures for hot holding	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
20. Proper cooling time & temperatures	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
21. Proper hot holding temperatures	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
22. Proper cold holding temperatures	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
23. Proper Date Marking	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
23B. TCS Foods Disposition	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
24A. Time as a public health control: procedures	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
24B. Time as a public health control: temperatures & discarding food	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
24C. Time as a public health control: highly susceptible population (HSP)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

### Consumer Advisory

	IN	OUT	N/O	N/A	COS	REPEAT
25. Consumer advisory provided for raw or undercooked foods	<input type="radio"/>	<input type="radio"/>		<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

### Highly Susceptible Populations (HSP)

	IN	OUT	N/O	N/A	COS	REPEAT
26A. Pasteurized foods used; prohibited foods not offered	<input type="radio"/>	<input type="radio"/>		<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
26B. Reservice of foods	<input type="radio"/>	<input type="radio"/>		<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

### Chemical

	IN	OUT	N/O	N/A	COS	REPEAT
27. Food additives: approved and properly used	<input type="radio"/>	<input type="radio"/>		<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
28A. Toxic substances identified, stored and used	<input checked="" type="radio"/>	<input type="radio"/>		<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
28B. Poisonous materials, sanitizers, additives, medicines restriction, separation, storage	<input checked="" type="radio"/>	<input type="radio"/>		<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
28C. Conditions of Use: law	<input checked="" type="radio"/>	<input type="radio"/>		<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

### Conformance with Approved Procedures

	IN	OUT	N/O	N/A	COS	REPEAT
29A. Compliance with variance, specialized process, & HACCP plan	<input type="radio"/>	<input type="radio"/>		<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
29B. Treating juice- HACCP, reduced oxygen packaging w/out variance, conformance with approved procedures	<input type="radio"/>	<input type="radio"/>		<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
29C. When HACCP plan is required	<input type="radio"/>	<input type="radio"/>		<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

### GOOD RETAIL PRACTICES

Good Retail Practices are preventative measures to control the addition of pathogens, chemicals, and physical objects into foods.

IN = In compliance    OUT = not in compliance    COS - corrected on -site during inspection    REPEAT = repeat violation

### Safe Food and Water

	IN	OUT	N/O	N/A	COS	REPEAT
30. Pasteurized eggs used where required	<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>

Inspector \_\_\_\_\_

Acknowledged Receipt : \_\_\_\_\_

Page 3 of 7

## Food Establishment Inspection Report - FDA

Safe Food and Water	IN	OUT	N/O	N/A	COS	REPEAT
---------------------	----	-----	-----	-----	-----	--------

31A. Water & ice from approved source

☒ ☐ ☐ ☐ ☐ ☐

***This item has Notes. See Footnote 2 at end of questionnaire.***

31B. Sampling, alternative water supply

☐ ☐ ☐ ☒ ☐ ☐

31C. Sampling report

☐ ☐ ☐ ☒ ☐ ☐

32. Variance obtained for specialized processing methods

☐ ☐ ☐ ☒ ☐ ☐

Food Temperature Control	IN	OUT	N/O	N/A	COS	REPEAT
--------------------------	----	-----	-----	-----	-----	--------

33A. Proper cooling methods used; adequate equipment for temperature control

☒ ☐ ☐ ☐ ☐ ☐

33B. Frozen food

☒ ☐ ☐ ☐ ☐ ☐

34. Plant food properly cooked for hot holding

☒ ☐ ☐ ☐ ☐ ☐

35. Approved thawing methods used

☐ ☐ ☐ ☒ ☐ ☐

36A. Thermometers provided and accurate

☒ ☐ ☐ ☐ ☐ ☐

36B. Thermometers function properly

☒ ☐ ☐ ☐ ☐ ☐

Food Identification	IN	OUT	COS	REPEAT
---------------------	----	-----	-----	--------

37A. Food properly labeled; original container

☒ ☐ ☐ ☐

37B. Food labels, labeling of ingredients

☐ ☒ ☐ ☒

***This item has Notes. See Footnote 3 at end of questionnaire.***

Fail Notes	3-602.11 (B5)	<p><b><i>*Labeling of major food allergen</i></b></p> <p><b><i>[The prepacked salads were not labelled with the list of ingredients to enable students to make an informed decision about the packaged food product. It is therefore important that a list of the ingredients present in packaged foods is supplied.]</i></b></p>
------------	---------------	---

Prevention of Food Contamination	IN	OUT	COS	REPEAT
----------------------------------	----	-----	-----	--------

38A. Insects, rodents, & animals not present

☒ ☐ ☐ ☐

38B. Handling prohibition, controlling pests, prohibiting animals

☒ ☐ ☐ ☐

39A. Contamination prevented during food storage

☒ ☐ ☐ ☐

39B. Food display; ice used as an exterior coolant prohibited as an ingredient

☒ ☐ ☐ ☐

39C. Consumer self-service operations- utensils and monitoring

☒ ☐ ☐ ☐

40A. Personal cleanliness- prohibition jewelry

☒ ☐ ☐ ☐

40B. Maintenance of fingernails

☒ ☐ ☐ ☐

41. Wiping cloths; properly used and stored

☒ ☐ ☐ ☐

42A. Washing Produce - following chemical manufacturers label

☒ ☐ ☐ ☐

42B. Washing produce

☒ ☐ ☐ ☐

42C. Washing produce- chemicals

☒ ☐ ☐ ☐

Proper Use of Utensils	IN	OUT	COS	REPEAT
------------------------	----	-----	-----	--------

43. In-use utensils; properly stored

☒ ☐ ☐ ☐

44. Utensils, equipment & linens; properly stored, dried, and handled

☒ ☐ ☐ ☐

Inspector

Acknowledged Receipt :

Page 4 of 7

## Food Establishment Inspection Report - FDA

Proper Use of Utensils	IN	OUT	COS	REPEAT
45A. Single-use/ single service articles properly stored and used, required	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
45B. Single-use/service articles use limitation, kitchenware and tableware preventing contamination	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
46. Gloves used properly	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

Utensils, Equipment and Vending	IN	OUT	COS	REPEAT
47A. Food & non-food contact surfaces cleanable	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
47B. Food contact surfaces /utensils cleanability, molluscan shellfish tanks, consumer self-service	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
47C. Properly designed characteristics: food and non-food contact surfaces, molluscan shellfish tanks	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
48A. Warewashing facilities: installed, maintained, & used; test strips	<input type="radio"/>	<input checked="" type="radio"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>

*Fail Notes*     4-302.14     *Sanitizing Solutions, Testing Devices*  
*[School kitchen did not have any thermolabels to test its high temperature Hobart dishwasher. In hot water mechanical warewashing operations, an irreversible registering temperature indicator shall be provided and readily accessible for measuring the utensil surface temperature. Obtain and use 160°F Thermolabels. Test the machine at least daily. A source for thermolabels is: www.paperthermometer.com]*

48B. Operational warewashing machines	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
49. Non-food contact surfaces clean	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

Physical Facilities	IN	OUT	N/A	COS	REPEAT
50. Hot & cold water available; adequate pressure	<input checked="" type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>
51A. Plumbing installed; proper backflow devices	<input checked="" type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>
51B. Prohibiting a cross-connection, inspection and servicing system	<input checked="" type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>
51C. Approved system and cleanable fixtures, service sink	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
52A. Sewage and waste water properly disposed	<input checked="" type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>
52B. Grease traps easily accessible for cleaning	<input checked="" type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>
52C. Removing mobile food establishment waste	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
53A. Toilet facilities; properly constructed, supplied, & cleaned	<input checked="" type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>
53B. Toilet tissue availability	<input checked="" type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>
54. Garbage & refuse properly disposed; facilities maintained	<input checked="" type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>
55A. Physical facilities installed, maintained, & clean	<input checked="" type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>
55B. Private homes and living or sleeping quarters, use prohibition	<input checked="" type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>
56. Adequate ventilation & lighting; designated areas used	<input checked="" type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>

### MASSACHUSETTS ONLY REGULATIONS

Rules and Regulations adopted for use in Massachusetts only.

Facilities	IN	OUT	COS	REPEAT
------------	----	-----	-----	--------

Inspector \_\_\_\_\_

Acknowledged Receipt : \_\_\_\_\_

Page 5 of 7

## Food Establishment Inspection Report - FDA

### Facilities

57A. Catering

IN	OUT	COS	REPEAT
<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

57B. When plans are reviewed, prerequisite for operations- valid permit

<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
-----------------------	-----------------------	--------------------------	--------------------------

57C. Contents of plans and specifications, preoperational inspections

<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
-----------------------	-----------------------	--------------------------	--------------------------

58. Mobile Food Operations

<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
-----------------------	-----------------------	--------------------------	--------------------------

59. Temporary Food Establishments

<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
-----------------------	-----------------------	--------------------------	--------------------------

60. Residential Kitchens

<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
-----------------------	-----------------------	--------------------------	--------------------------

### Procedures

61. Anti-choking Procedures

<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
-----------------------	-----------------------	--------------------------	--------------------------

62. Tobacco Products: Notice and Sale

<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
-----------------------	-----------------------	--------------------------	--------------------------

63. Food Allergy Awareness Requirements

<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
-----------------------	-----------------------	--------------------------	--------------------------

Inspector

Acknowledged Receipt :

Page 6 of 7

## Food Establishment Inspection Report - FDA

### **Footnote 1**

**Notes:**

PIC (Ed) has only been employed at the school kitchen for 6 weeks. He did not have his serve safe certificate at the time of visit but was relatively knowledgeable in food safety issues. Spoke with Bob Wyatt (a member of the operations team for Newton Public Schools) who informed me that there will be training for all managers during the school christmas holidays.

### **Footnote 2**

**Notes:**

Ice machine out of order at time of visit.

### **Footnote 3**

**Notes:**

Informed by the PIC and the rep from the operations team for Newton PS that a new printer has been acquired but waiting for IT to set it up.



**City of Newton**  
**Health and Human Services**  
 Deborah Youngblood, PhD, Commissioner  
 1000 Commonwealth Ave Newton, MA 02459  
 (617) 796-1420



**Public Health**  
 Prevent. Promote. Protect.

**Food Establishment Inspection Report - FDA**

**Insp Date:** 6/12/2018      **Business ID:** 1N2286  
**Business:** Oak Hill Middle School  
 130 Wheeler Rd.

Newton, MA 02459

**Inspection:** AN000317  
**Section:** 2  
**Phone:** 559-9200  
**Inspector:** 07311992 Brianne Gray  
**Reason:** 1-Routine  
**Results:** No Follow-up

**Inspection Summary**

Official Order for Correction: Based on an inspection today, the items checked indicate violations of 105 CMR 590.000/ 2009 Federal Food Code. This report, when signed below by the Commissioner of Health / Agent constitutes an order by the Commissioner of Health. Failure to correct violations cited in this report may result in suspension or revocation of the food establishment permit and cessation of food establishment operations. If aggrieved by this order, you have the right to a hearing. The request must be in writing and submitted to the Commissioner of Health at the above address within 10 days of receipt of this order.

Est. Type 1 - Food Svc Establis License/Permit # \_\_\_\_\_ Risk Category 02 Risk Level Observed 02 Low

**FOODBORNE ILLNESS RISK FACTORS AND PUBLIC HEALTH INTERVENTIONS**

Compliance status: IN = in compliance OUT = not in compliance N/O = not observed N/A = not applicable

Marked in appropriate box for COS and/or R. COS = corrected on-site during inspection R = repeat violation

Risk factors are improper practices or procedures identified as the most prevalent contributing factors of foodborne illness or injury. Public Health Interventions are control measures to prevent foodborne illnesses or injury.

**Supervision**

1A. PIC Present

IN	OUT	N/O	N/A	COS	REPEAT
<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>

B. Cert. food manager, knowledge, no critical violations

<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>
----------------------------------	-----------------------	--	--	--------------------------	--------------------------

C. Duties of PIC

<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>
----------------------------------	-----------------------	--	--	--------------------------	--------------------------

**Employee Health**

2. Management, food employee and conditional employee; knowledge, responsibilities and reporting

IN	OUT	N/O	N/A	COS	REPEAT
<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

3. Proper use of restriction and exclusion

<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>
----------------------------------	-----------------------	--	--	--------------------------	--------------------------

**Good Hygienic Practices**

4A. Proper eating, tasting, drinking, or tobacco use

IN	OUT	N/O	N/A	COS	REPEAT
<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>

B. Preventing contamination when tasting

<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>
----------------------------------	-----------------------	-----------------------	--	--------------------------	--------------------------

5. No discharge from eyes, nose, and mouth

<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>
----------------------------------	-----------------------	-----------------------	--	--------------------------	--------------------------

*Brianne Gray*

Inspector

Acknowledged Receipt :

Page 1 of 5

## Food Establishment Inspection Report - FDA

### Preventing Contamination by Hands

- |  | IN                               | OUT                              | N/O                   | N/A                   | COS                      | REPEAT                              |
|--|----------------------------------|----------------------------------|-----------------------|-----------------------|--------------------------|-------------------------------------|
| 6A. Hands clean & properly washed  | <input checked="" type="radio"/> | <input type="radio"/>            | <input type="radio"/> |                       | <input type="checkbox"/> | <input type="checkbox"/>            |
| B. Where to wash, hand antiseptics   | <input checked="" type="radio"/> | <input type="radio"/>            | <input type="radio"/> |                       | <input type="checkbox"/> | <input type="checkbox"/>            |
| 7. No bare hand contact with RTE food or a pre-approved alternative procedure properly allowed | <input checked="" type="radio"/> | <input type="radio"/>            | <input type="radio"/> | <input type="radio"/> | <input type="checkbox"/> | <input type="checkbox"/>            |
| 8A. Adequate handwashing sinks properly supplied and accessible                                | <input type="radio"/>            | <input checked="" type="radio"/> |                       |                       | <input type="checkbox"/> | <input checked="" type="checkbox"/> |

*Fail Notes*

6-301.11 *Handwashing Cleanser, Availability*  
*[There was no soap available at the handwashing sink opposite the 3-bay sink area. Each handwashing sink shall be provided with a supply of hand cleaning liquid, powder, or bar soap. ]*

6-301.12 *Hand Drying Provision*  
*[There were no paper towels available at the handwashing sink opposite the 3-bay sink area. Provisions must be provided for hand drying so that employees will not dry their hands on their clothing or other unclean materials. ]*

- |   |                                  |                       |  |  |                          |                          |
|---|----------------------------------|-----------------------|--|--|--------------------------|--------------------------|
| B. Handwashing sinks accessible with proper signage, handwashing aids | <input checked="" type="radio"/> | <input type="radio"/> |  |  | <input type="checkbox"/> | <input type="checkbox"/> |
| C. Conveniently located handwashing sink                              | <input checked="" type="radio"/> | <input type="radio"/> |  |  | <input type="checkbox"/> | <input type="checkbox"/> |

### Approved Sources

- |  | IN                               | OUT                   | N/O                              | N/A                   | COS                      | REPEAT                   |
|--|----------------------------------|-----------------------|----------------------------------|-----------------------|--------------------------|--------------------------|
| 9A. Milk, eggs, juice, bottled water, hermetically sealed food | <input checked="" type="radio"/> | <input type="radio"/> |                                  |                       | <input type="checkbox"/> | <input type="checkbox"/> |
| B. Fish and shellfish  | <input checked="" type="radio"/> | <input type="radio"/> | <input type="radio"/>            | <input type="radio"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 10. Food received at proper temperature                        | <input type="radio"/>            | <input type="radio"/> | <input checked="" type="radio"/> | <input type="radio"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 11. Food in good condition, safe, & unadulterated              | <input checked="" type="radio"/> | <input type="radio"/> |                                  |                       | <input type="checkbox"/> | <input type="checkbox"/> |

### Protection from Contamination

- |  | IN                               | OUT                              | N/O                   | N/A                   | COS                      | REPEAT                   |
|--|----------------------------------|----------------------------------|-----------------------|-----------------------|--------------------------|--------------------------|
| 12A. Food separated & protected  | <input checked="" type="radio"/> | <input type="radio"/>            | <input type="radio"/> | <input type="radio"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| B. Gloves, use limitation, one task- contaminated  | <input checked="" type="radio"/> | <input type="radio"/>            | <input type="radio"/> | <input type="radio"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 13A. Food-contact surfaces: cleaned & sanitized 171° F                                   | <input checked="" type="radio"/> | <input type="radio"/>            |                       | <input type="radio"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| B. Food contact surfaces cleaned and sanitized NMT 194° F, NLT 180° F                    | <input checked="" type="radio"/> | <input type="radio"/>            |                       | <input type="radio"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| C. Mechanical warewashing equipment sanitization food contact surfaces, equip., utensils | <input type="radio"/>            | <input checked="" type="radio"/> |                       | <input type="radio"/> | <input type="checkbox"/> | <input type="checkbox"/> |

*Fail Notes*

4-602.11 (B,D,E) *\*Cleaning Frequency of Equipment Food-Contact Surfaces and Utensils*  
*[A few spots of a mold-like substance and debris were observed inside of the ice machine. Equipment food-contact surfaces and utensils shall be clean to sight and touch. ]*

- |   |                                  |                       |  |  |                          |                          |
|---|----------------------------------|-----------------------|--|--|--------------------------|--------------------------|
| 14. Proper disposition of returned, previously served reconditions, & unsafe food | <input checked="" type="radio"/> | <input type="radio"/> |  |  | <input type="checkbox"/> | <input type="checkbox"/> |
|---|----------------------------------|-----------------------|--|--|--------------------------|--------------------------|

### Potentially Hazardous Food Time/Temperature

- |   | IN                               | OUT                   | N/O                   | N/A                   | COS                      | REPEAT                   |
|---|----------------------------------|-----------------------|-----------------------|-----------------------|--------------------------|--------------------------|
| 15. Proper cooking time & temperatures          | <input checked="" type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 16. Proper reheating procedures for hot holding | <input checked="" type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 17. Proper cooling time & temperatures          | <input checked="" type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="checkbox"/> | <input type="checkbox"/> |

*Brianne Gray*

Inspector

Acknowledged Receipt :

Page 2 of 5

## Food Establishment Inspection Report - FDA

### Potentially Hazardous Food Time/Temperature

18. Proper hot holding temperatures

IN OUT N/O N/A COS REPEAT  
☐ ☒ ☐ ☐ ☐ ☐

Fail Notes 3-501.16 (A)

*\*Hot PHFs Maintained at or Above 135oF  
 [Hotdogs at the hot holding station were observed at 113oF and 122oF. PIC stated that hotdogs are cooked and kept in the warming oven. Right before lunch begins, the hotdogs are placed in the hot holding station. They are used within a few hours. Hot PHFs should be held at a temperature of 135oF.]*

19. Proper cold holding temperatures

☒ ☐ ☐ ☐ ☐ ☐

20. Time as a public health control: procedures & record

☒ ☐ ☐ ☐ ☐ ☐

### Highly Susceptible Populations

21. Pasteurized foods used; prohibited foods not offered

IN OUT N/O N/A COS REPEAT  
☐ ☐ ☐ ☒ ☐ ☐

### Chemical

22. Food additives: approved and properly used

☐ ☐ ☐ ☒ ☐ ☐

23A. Toxic substances properly identified, stored and used

☒ ☐ ☐ ☐ ☐ ☐

B. Restriction presence and use, restriction and storage of medicines

☒ ☐ ☐ ☐ ☐ ☐

C. Storage- other personal care items

☒ ☐ ☐ ☐ ☐ ☐

### GOOD RETAIL PRACTICES

Good Retail Practices are preventative measures to control the addition of pathogens, chemicals, and physical objects into foods.

IN = In compliance OUT = not in compliance COS - corrected on -site during inspection REPEAT = repeat violation

### Safe Food and Water

24. Water & ice from approved source

IN OUT N/O N/A COS REPEAT  
☒ ☐ ☐ ☐ ☐ ☐

### Food Temperature Control

25A. Proper cooling methods used; adequate equipment for temperature control

☒ ☐ ☐ ☐ ☐ ☐

B. Frozen food

☒ ☐ ☐ ☐ ☐ ☐

26. Plant food properly cooked for hot holding

☒ ☐ ☐ ☐ ☐ ☐

27. Approved thawing methods used

☒ ☐ ☐ ☐ ☐ ☐

28A. Thermometers provided and accurate

☒ ☐ ☐ ☐ ☐ ☐

B. Thermometers function properly

☒ ☐ ☐ ☐ ☐ ☐

### Food Identification

29A. Food properly labeled; original container

IN OUT COS REPEAT  
☒ ☐ ☐ ☐

B. Food labels, labeling of ingredients

☒ ☐ ☐ ☐

### Prevention of Food Contamination

30A. Insects, rodents, & animals not present

☒ ☐ ☐ ☐

B. Handling prohibition, controlling pests, prohibiting animals

☒ ☐ ☐ ☐

*Buame Hay*

Inspector

Acknowledged Receipt :

Page 3 of 5

## Food Establishment Inspection Report - FDA

### Prevention of Food Contamination

	IN	OUT	COS	REPEAT
31A. Contamination prevented during food storage	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
B. Food display; ice used as an exterior coolant prohibited as an ingredient	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
C. Consumer self-service operations- utensils and monitoring	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
32A. Personal cleanliness- prohibition jewelry	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
B. Maintenance of fingernails	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
33. Wiping cloths; properly used and stored	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
34. Washing fruits & vegetables	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

### Proper Use of Utensils

	IN	OUT	COS	REPEAT
35. In-use utensils; properly stored	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
36. Utensils, equipment & linens; properly stored, dried, and handled	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
37A. Single-use/ single service articles properly stored and used, required	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
B. Single-use/service articles use limitation, kitchenware and tableware preventing contamination	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
38. Gloves used properly	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

### Utensils, Equipment and Vending

	IN	OUT	COS	REPEAT
39A. Food & non-food contact surfaces cleanable	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
B. Food contact surfaces /utensils cleanability, molluscan shellfish tanks, consumer self-service	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
C. Properly designed characteristics: food and non-food contact surfaces, molluscan shellfish tanks	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
40A. Warewashing facilities: installed, maintained, & used; test strips	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
B. Operational warewashing machines	<input type="radio"/>	<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

*Fail Notes*     **4-302.13**     *Temperature measuring devices, manual warewashing [PIC stated that they did not have a temperature measuring device for the dishwashing machine. In hot water mechanical warewashing operations, an irreversible registering temperature indicator shall be provided and readily accessible for measuring the utensil surface temperature. ]*

41. Non-food contact surfaces clean	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
-------------------------------------	----------------------------------	-----------------------	--------------------------	--------------------------

### Physical Facilities

	IN	OUT	N/O	N/A	COS	REPEAT
42. Hot & cold water available; adequate pressure	<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>
43A. Plumbing installed; proper backflow devices	<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>
B. Prohibiting a cross-connection, non-drinking water, system maintained in good repair	<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>
C. Approved system and cleanable fixtures, service sink	<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>
44A. Sewage and waste water properly disposed	<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>
B. Grease traps easily accessible for cleaning	<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>
45A. Toilet facilities; properly constructed, supplied, & cleaned	<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>

*Buame Day*

Inspector

Acknowledged Receipt :

Page 4 of 5

## Food Establishment Inspection Report - FDA

### Physical Facilities

	IN	OUT	N/O	N/A	COS	REPEAT
B. Toilet tissue availability	<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>
46. Garbage & refuse properly disposed; facilities maintained	<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>
47A. Physical facilities installed, maintained, & clean	<input type="radio"/>	<input checked="" type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>

*Fail Notes*    **6-501.114**    *Maintaining Premises, Unnecessary Items and Litter  
[There is a slicer across from the dishwasher area that is no longer being used. The premises shall be free of items that are unnecessary to the operation or maintenance of the establishment, such as equipment that is nonfunctional or no longer used.]*

B. Cleaning maintenance tools, preventing contamination	<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>
48. Adequate ventilation & lighting; designated areas used	<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>

### MASSACHUSETTS ONLY REGULATIONS

Rules and Regulations adopted for use in Massachusetts only.

#### Facilities

	IN	OUT	COS	REPEAT
49A. When plans are reviewed, prerequisite for operations- valid permit	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
B. Contents of plans and specifications, preoperational inspections	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

#### Procedures

	IN	OUT	COS	REPEAT
50. Anti-choking Procedures	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
51. Tobacco Products: Notice and Sale	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

*Brianne Gray*

Inspector

Acknowledged Receipt :

Page 5 of 5



City of Newton  
Health and Human Services  
Deborah Youngblood, PhD, Commissioner  
1000 Commonwealth Ave Newton, MA 02459  
(617) 796-1420



**Public Health**  
Prevent. Promote. Protect.

Food Establishment Inspection Report - FDA

**Insp Date:** 10/9/2018 **Business ID:** 1N2286  
**Business:** Oak Hill Middle School  
130 Wheeler Rd.

Newton, MA 02459

**Inspection:** 6N000052  
**Section:** 2  
**Phone:** 559-9200  
**Inspector:** 1N11123 Nicola Assan  
**Reason:** 1-Routine  
**Results:** No Follow-up

Inspection Summary

Official Order for Correction: Based on an inspection today, the items checked indicate violations of 105 CMR 590.000/ 2009 Federal Food Code. This report, when signed below by the Commissioner of Health / Agent constitutes an order by the Commissioner of Health. Failure to correct violations cited in this report may result in suspension or revocation of the food establishment permit and cessation of food establishment operations. If aggrieved by this order, you have the right to a hearing. The request must be in writing and submitted to the Commissioner of Health at the above address within 10 days of receipt of this order.

Est. Type 1 - Food Svc Establis License/Permit # \_\_\_\_\_ Risk Category 02 Risk Level Observed 02 Low

FOODBORNE ILLNESS RISK FACTORS AND PUBLIC HEALTH INTERVENTIONS

Compliance status: IN = in compliance OUT = not in compliance N/O = not observed N/A = not applicable

Marked in appropriate box for COS and/or R. COS = corrected on-site during inspection R = repeat violation

Risk factors are improper practices or procedures identified as the most prevalent contributing factors of foodborne illness or injury. Public Health Interventions are control measures to prevent foodborne illnesses or injury.

Supervision

1A. PIC Present

IN	OUT	N/O	N/A	COS	REPEAT
<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>

B. Cert. food manager, knowledge, no critical violations

<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>
----------------------------------	-----------------------	--	--	--------------------------	--------------------------

C. Duties of PIC

<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>
----------------------------------	-----------------------	--	--	--------------------------	--------------------------

Employee Health

2. Management, food employee and conditional employee; knowledge, responsibilities and reporting

IN	OUT	N/O	N/A	COS	REPEAT
<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

3. Proper use of restriction and exclusion

<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>
----------------------------------	-----------------------	--	--	--------------------------	--------------------------

Good Hygienic Practices

4A. Proper eating, tasting, drinking, or tobacco use

IN	OUT	N/O	N/A	COS	REPEAT
<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>

Inspector

Acknowledged Receipt : Tim Viveiros

Page 1 of 8

## Food Establishment Inspection Report - FDA

### Good Hygienic Practices

IN OUT N/O N/A COS REPEAT

*Fail Notes*    2-401.11    *\*Eating, Drinking, or Using Tobacco*  
*[An employee was observed eating cookies in the food service area. An employee shall eat or drink only in designated areas so that exposed food; clean equipment, utensils and linens; unwrapped single-service and single-use articles; or other items needing protection does not become contaminated.]*

B. Preventing contamination when tasting

☒ ☐ ☐ ☐ ☐

5. No discharge from eyes, nose, and mouth

☒ ☐ ☐ ☐ ☐

### Preventing Contamination by Hands

IN OUT N/O N/A COS REPEAT

6A. Hands clean & properly washed

☐ ☒ ☐ ☐ ☐

*Fail Notes*    2-301.14    *\*When to Wash*  
*[Employees were observed not washing their hands despite performing numerous tasks. Food employees shall clean their hands and exposed portions of their arms immediately before engaging in food preparation including working with exposed food, clean equipment and utensils, and unwrapped single-use items and after touching bare human body parts other than clean hands and clean, exposed portions of arms; after using the toilet room; after handling animals; after coughing, sneezing, using a handkerchief or disposable tissue, using tobacco, eating or drinking; after handling soiled equipment or utensils, during food preparation, as often as necessary to remove soil and contamination and to prevent cross contamination when changing tasks; when switching between working with raw food and working with RTE (ready-to-eat) food; before donning gloves to initiate a task that involves working with food; and after engaging in other activities that contaminate the hands. Hands shall be washed for at least twenty (20) seconds, using soap. Rinse hands under clean, running warm water, apply soap, rub together vigorously for at least 10-15 seconds, thoroughly rinse under clean, running warm water and dry.]*

B. Where to wash, hand antiseptics

☒ ☐ ☐ ☐ ☐

7. No bare hand contact with RTE food or a pre-approved alternative procedure properly allowed

☒ ☐ ☐ ☐ ☐ ☐

8A. Adequate handwashing sinks properly supplied and accessible

☐ ☒ ☐ ☐ ☒

*Fail Notes*    6-301.11    *Handwashing Cleanser, Availability*  
*[There was no soap at the handwashing sink opposite the 3 compartment sink. Each handwashing sink or a group of adjacent handwashing sinks shall be provided with a supply of hand cleaning liquid, powder or bar soap.]*



Inspector

Acknowledged Receipt : Tim Viveiros

Page 2 of 8

# Food Establishment Inspection Report - FDA

## Preventing Contamination by Hands

IN OUT N/O N/A COS REPEAT

**Fail Notes** 6-301.12 **Hand Drying Provision**  
*[There were no paper towels in the paper towel dispenser at the handwashing sink in the food service area. In addition, there was no hand drying provision at the handwashing sink opposite the 3 compartment sink. Each handwashing sink or group of adjacent handwashing sinks shall be provided with individual, disposable towels; or a continuous towel system that supplies the user with a clean towel; or a heated air hand drying device; or a hand drying device that employs an air-knife system that delivers high velocity, pressurized air at ambient temperatures.]*

B. Handwashing sinks accessible with proper signage, handwashing aids

☐ ☒ ☐ ☐

**Fail Notes** 6-301.14 **Handwashing signage**  
*[There was no signage at the handwashing sink opposite the 3 bay compartment sink, indicating that employees should wash their hands. A sign or poster that notifies employees to wash their hands shall be provided at all handwashing sinks used by food employees and shall be clearly visible to food employees.]*

C. Conveniently located handwashing sink

☒ ☐ ☐ ☐

## Approved Sources

IN OUT N/O N/A COS REPEAT

9A. Milk, eggs, juice, bottled water, hermetically sealed food

☒ ☐ ☐ ☐

B. Fish and shellfish

☒ ☐ ☐ ☐ ☐ ☐

10. Food received at proper temperature

☐ ☐ ☒ ☐ ☐ ☐

11. Food in good condition, safe, & unadulterated

☒ ☐ ☐ ☐

## Protection from Contamination

IN OUT N/O N/A COS REPEAT

12A. Food separated & protected

☒ ☐ ☐ ☐ ☐ ☐

B. Gloves, use limitation, one task- contaminated

☒ ☐ ☐ ☐ ☐ ☐

13A. Food-contact surfaces: cleaned & sanitized 171° F

☒ ☐ ☐ ☐ ☐

B. Food contact surfaces cleaned and sanitized NMT 194° F, NLT 180° F

☐ ☐ ☐ ☐ ☐

C. Mechanical warewashing equipment sanitization food contact surfaces, equip., utensils

☒ ☐ ☐ ☐ ☐

14. Proper disposition of returned, previously served reconditions, & unsafe food

☒ ☐ ☐ ☐

## Potentially Hazardous Food Time/Temperature

IN OUT N/O N/A COS REPEAT

15. Proper cooking time & temperatures

☐ ☐ ☒ ☐ ☐ ☐

16. Proper reheating procedures for hot holding

☐ ☐ ☐ ☒ ☐ ☐

17. Proper cooling time & temperatures

☐ ☐ ☒ ☐ ☐ ☐

18. Proper hot holding temperatures

☒ ☐ ☐ ☐ ☐ ☐

19. Proper cold holding temperatures

☐ ☒ ☐ ☐ ☐ ☐

*Tim Viveiros*

Inspector

Acknowledged Receipt : Tim Viveiros

Page 3 of 8

## Food Establishment Inspection Report - FDA

Potentially Hazardous Food Time/Temperature

IN OUT N/O N/A COS REPEAT

Fail Notes 3-501.16(B) [590.004(F)] \*Cold PHFs Maintained at or Below 41oF  
[The temperature of the refrigerator was 44.1 degrees fahrenheit. In addition, the temperature of the cut tomatoes and shredded lettuce in the cold holding unit was 46.2 and 47.7 degrees fahrenheit respectively. Maintaining TCS foods (time/temperature control for the safety of foods and ready-to-eat foods) at a temperature of 41 degrees fahrenheit or below will limit the growth of pathogens that may be present in or on the food and may help prevent foodborne illness.]

20. Time as a public health control: procedures & record

☒ ☐ ☐ ☐ ☐ ☐

Highly Susceptible Populations

IN OUT N/O N/A COS REPEAT

21. Pasteurized foods used; prohibited foods not offered

☐ ☐ ☒ ☐ ☐

Chemical

IN OUT N/O N/A COS REPEAT

22. Food additives: approved and properly used

☐ ☐ ☒ ☐ ☐

23A. Toxic substances properly identified, stored and used

☒ ☐ ☐ ☐ ☐

B. Restriction presence and use, restriction and storage of medicines

☒ ☐ ☐ ☐ ☐

C. Storage- other personal care items

☒ ☐ ☐ ☐ ☐

### GOOD RETAIL PRACTICES

Good Retail Practices are preventative measures to control the addition of pathogens, chemicals, and physical objects into foods.

IN = In compliance OUT = not in compliance COS - corrected on -site during inspection REPEAT = repeat violation

Safe Food and Water

IN OU N/ N/A CO REPEA

24. Water & ice from approved source

☒ ☐ ☐ ☐ ☐ ☐

Food Temperature Control

IN OUT N/O N/A COS REPEAT

25A. Proper cooling methods used; adequate equipment for temperature control

☐ ☐ ☒ ☐ ☐ ☐

B. Frozen food

☒ ☐ ☐ ☐ ☐ ☐

26. Plant food properly cooked for hot holding

☒ ☐ ☐ ☐ ☐ ☐

27. Approved thawing methods used

☐ ☐ ☒ ☐ ☐ ☐

28A. Thermometers provided and accurate

☒ ☐ ☐ ☐ ☐ ☐

B. Thermometers function properly

☒ ☐ ☐ ☐ ☐ ☐

Food Identification

IN OUT COS REPEAT

29A. Food properly labeled; original container

☐ ☒ ☐ ☐

***This item has Notes. See Footnote 1 at end of questionnaire.***



Inspector

Acknowledged Receipt : Tim Viveiros

Page 4 of 8

## Food Establishment Inspection Report - FDA

### Food Identification

IN OUT COS REPEAT

**Fail Notes** 3-302.12 *Food Storage Containers Identified with Common Name of Food*  
*[There was tomato sauce in a container in the walk-in refrigerator that was not labeled. Certain foods may be difficult to identify after they are removed from their original packaging. Consumers may be allergic to certain foods or ingredients. The mistaken use of an ingredient, when the consumer has specifically requested that it not be used, may result in severe medical consequences. It is therefore important that food storage containers are labeled correctly.]*

B. Food labels, labeling of ingredients

☐ ☒ ☐ ☐

**Fail Notes** 3-602.11 [590.004(J)] *\*Labelling of Ingredients*  
*[The chocolate pudding was not labeled including list of ingredients. Food items need to be labeled with a list of ingredients so that the customer can make an informed choice. This is particularly important for customers who are prone to allergic reactions from certain foods.]*

### Prevention of Food Contamination

IN OUT COS REPEAT

30A. Insects, rodents, & animals not present

☒ ☐ ☐ ☐

B. Handling prohibition, controlling pests, prohibiting animals

☒ ☐ ☐ ☐

31A. Contamination prevented during food storage

☒ ☐ ☐ ☐

B. Food display; ice used as an exterior coolant prohibited as an ingredient

☒ ☐ ☐ ☐

C. Consumer self-service operations- utensils and monitoring

☒ ☐ ☐ ☐

32A. Personal cleanliness- prohibition jewelry

☒ ☐ ☐ ☐

B. Maintenance of fingernails

☒ ☐ ☐ ☐

33. Wiping cloths; properly used and stored

☐ ☒ ☐ ☐

**Fail Notes** 3-304.14 *Wiping Cloths, Use Limitation*  
*[Wiping cloths were observed stored on the prep tables. Wiping cloths in-use for wiping counters and other equipment surfaces shall be held between uses in a chemical sanitizer solution at a concentration specified by the manufacturer (read the label). Wiping cloths used for surfaces in contact with raw animal foods shall be kept separate from cloths used for other purposes. Containers of chemical sanitizing solution in which wet wiping cloths are held between uses shall be stored off the floor and used in a manner that prevents contamination of food, equipment, utensils, linens and single-use service items (to-go containers). If a surface needs to be wiped from crumbs or other ingredients (not allergens or raw meats - to remove allergens, soapy water MUST be used) use a disposable paper towel. Use once and dispose. Avoid using wiping cloths under cutting boards and to cover foods. Instead use a non-slip mat under the cutting boards. Using a paper towel is acceptable.]*

34. Washing fruits & vegetables

☒ ☐ ☐ ☐

### Proper Use of Utensils

IN OUT COS REPEAT

35. In-use utensils; properly stored

☒ ☐ ☐ ☐

36. Utensils, equipment & linens; properly stored, dried, and handled

☒ ☐ ☐ ☐

37A. Single-use/ single service articles properly stored and used, required

☒ ☐ ☐ ☐



Inspector

Acknowledged Receipt : Tim Viveiros

Page 5 of 8

## Food Establishment Inspection Report - FDA

### Proper Use of Utensils

B. Single-use/service articles use limitation, kitchenware and tableware preventing contamination

IN OUT COS REPEAT  
☒ ☐ ☐ ☐

38. Gloves used properly

☒ ☐ ☐ ☐

### Utensils, Equipment and Vending

39A. Food & non-food contact surfaces cleanable

☒ ☐ ☐ ☐

B. Food contact surfaces /utensils cleanability, molluscan shellfish tanks, consumer self-service

☒ ☐ ☐ ☐

C. Properly designed characteristics: food and non-food contact surfaces, molluscan shellfish tanks

☒ ☐ ☐ ☐

40A. Warewashing facilities: installed, maintained, & used; test strips

☒ ☐ ☐ ☐

B. Operational warewashing machines

☒ ☐ ☐ ☐

***This item has Notes. See Footnote 2 at end of questionnaire.***

41. Non-food contact surfaces clean

☒ ☐ ☐ ☐

**Fail Notes** | 4-601.11 (B&C) *\*Equipment, Food-Contact Surfaces, Nonfood-Contact Surfaces, and Utensils  
 [The gaskets inside the refrigerator were dirty. Clean the gaskets and maintain in a clean condition thereafter.]*

### Physical Facilities

42. Hot & cold water available; adequate pressure

IN OUT N/O N/A COS REPEAT  
☒ ☐ ☐ ☐

43A. Plumbing installed; proper backflow devices

☒ ☐ ☐ ☐

B. Prohibiting a cross-connection, non-drinking water, system maintained in good repair

☒ ☐ ☐ ☐

C. Approved system and cleanable fixtures, service sink

☒ ☐ ☐ ☐

44A. Sewage and waste water properly disposed

☒ ☐ ☐ ☐

B. Grease traps easily accessible for cleaning

☒ ☐ ☐ ☐

45A. Toilet facilities; properly constructed, supplied, & cleaned

☒ ☐ ☐ ☐

B. Toilet tissue availability

☒ ☐ ☐ ☐

46. Garbage & refuse properly disposed; facilities maintained

☒ ☐ ☐ ☐

47A. Physical facilities installed, maintained, & clean

☐ ☒ ☐ ☒

**Fail Notes** | 6-501.114 *Maintaining Premises, Unnecessary Items and Litter  
 [There is a slicer across from the dishwasher area that is no longer being used. The premises shall be free of items that are unnecessary to the operation or maintenance of the establishment, such as equipment that is nonfunctional or no longer used.]*

B. Cleaning maintenance tools, preventing contamination

☒ ☐ ☐ ☐

48. Adequate ventilation & lighting; designated areas used

☒ ☐ ☐ ☐

### MASSACHUSETTS ONLY REGULATIONS

Rules and Regulations adopted for use in Massachusetts only.



Inspector

Acknowledged Receipt : Tim Viveiros

Page 6 of 8

## Food Establishment Inspection Report - FDA

### Facilities

49A. When plans are reviewed, prerequisite for operations- valid permit

IN OUT COS REPEAT

☐ ☐ ☐ ☐

B. Contents of plans and specifications, preoperational inspections

☐ ☐ ☐ ☐

### Procedures

50. Anti-choking Procedures

IN OUT COS REPEAT

☐ ☐ ☐ ☐

51. Tobacco Products: Notice and Sale

☐ ☐ ☐ ☐



Inspector

Acknowledged Receipt : Tim Viveiros

Page 7 of 8

## Food Establishment Inspection Report - FDA

### **Footnote 1**

**Notes:**

Although there is a date marking system in place, some of the labels on the food in the walk-in refrigerator appear to be confusing. Ensure that the day/date of preparation and the day/date for the food to be consumed, sold or discarded is clear.

### **Footnote 2**

**Notes:**

Thermolabels now in use for the Hobart dishwasher.



Inspector

Acknowledged Receipt : Tim Viveiros

Page 8 of 8



City of Newton  
Health and Human Services  
Deborah Youngblood, PhD, Commissioner  
1000 Commonwealth Ave Newton, MA 02459  
(617) 796-1420



Public Health  
Prevent, Promote, Protect

Food Establishment Inspection Report - FDA

Insp Date: 6/3/2019 Business ID: 1N2286  
Business: Oak Hill Middle School  
130 Wheeler Rd.

Newton, MA 02459

Inspection: 6N000130  
Section: 2  
Phone: 559-9200  
Inspector: 1N11123 Nicola Assan  
Reason: 1-Routine  
Results: No Follow-up R2

Inspection Summary

Official Order for Correction: Based on an inspection today, the items checked indicate violations of 105 CMR 590.000/ 2013 Federal Food Code. This report, when signed below by the Commissioner of Health / Agent constitutes an order by the Commissioner of Health. Failure to correct violations cited in this report may result in suspension or revocation of the food establishment permit and cessation of food establishment operations. If aggrieved by this order, you have the right to a hearing. The request must be in writing and submitted to the Commissioner of Health at the above address within 10 days of receipt of this order.

Est. Type 1 - Food Svc Establis License/Permit # \_\_\_\_\_ Risk Category 02 Risk Level Observed 02 Low

Foodborne Illness Complaint Investigated (All) ☐ Involving More Than Two Persons ☐

FOODBORNE ILLNESS RISK FACTORS AND PUBLIC HEALTH INTERVENTIONS

Compliance status: IN = in compliance OUT = not in compliance N/O = not observed N/A = not applicable

Marked in appropriate box for COS and/or R. COS = corrected on-site during inspection R = repeat violation

Risk factors are improper practices or procedures identified as the most prevalent contributing factors of foodborne illness or injury. Public Health Interventions are control measures to prevent foodborne illnesses or injury.

Supervision

1. PIC Present, Knowledge and Duties
2. Certified Food Protection Manager

IN	OUT	N/O	N/A	COS	REPEAT
<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>
<input checked="" type="radio"/>	<input type="radio"/>		<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

Employee Health / Responding to Contamination Events

- 3A. Employee Health: PIC Knowledge, Responsibilities & Reporting
- 3B. Employee Reporting to PIC
4. Proper Use of Restriction & Exclusion
5. Clean-up of Vomiting and Diarrheal Events

IN	OUT	N/O	N/A	COS	REPEAT
<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>
<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>
<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>
<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>

Good Hygienic Practices

- 6A. Proper eating, tasting, drinking, or tobacco use
- 6B. Preventing contamination when tasting

IN	OUT	N/O	N/A	COS	REPEAT
<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>
<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>

*Assan*

Inspector

Acknowledged Receipt : Tim Viveiros

Page 1 of 6

## Food Establishment Inspection Report - FDA

Good Hygienic Practices	IN	OUT	N/O	N/A	COS	REPEAT
7. No discharge from eyes, nose, and mouth	⊙	○	○		□	□

Control of Hands as a Vehicle of Contamination	IN	OUT	N/O	N/A	COS	REPEAT
8A. Hands clean & properly washed	⊙	○	○		□	□
8B. Where to wash, hand antiseptics	⊙	○	○		□	□
9. No bare hand contact with RTE food or a pre-approved alternative procedure properly allowed	⊙	○	○	○	□	□
10A. Adequate handwashing sinks properly supplied and accessible	⊙	○			□	□
10B. Handwashing sinks accesible with proper signage, handwashing aids	⊙	○			□	□

Approved Sources	IN	OUT	N/O	N/A	COS	REPEAT
11A. Milk, eggs, juice, bottled water, hermetically sealed food, game animals	⊙	○	○	○	□	□
11B. Packaged foods, labeling, whole muscle beef	⊙	○	○	○	□	□
11C. Obtaining raw fish, packaged meat & poultry, eggs	⊙	○	○	○	□	□
12A. Food received at proper temperature	○	○	⊙	○	□	□
12B. Shipping and receiving frozen food	○	○	⊙	○	□	□
13. Food in good condition, honestly presented, safe, & unadulterated	⊙	○			□	□
13B. Food package integrity	⊙	○			□	□
14A. Required records available: shellstock tags, parasite destruction	○	○	○	⊙	□	□
14B. Missing shellstock tags, destruction	○	○	○	⊙	□	□
14C. Parasite destruction- storing raw/partially cooked fish	○	○	○	⊙	□	□

Protection from Contamination	IN	OUT	N/O	N/A	COS	REPEAT
15A. Food separated & protected	⊙	○	○	○	□	□
15B. Cleaning equip/utensils/food containers	⊙	○	○	○	□	□
16A. Food-contact surfaces: cleaned & sanitized immersion 171° F and above	○	⊙		○	□	□

*Fail Notes*

4-501.114 (A-E, F 1&2) *Chemical Sanitization - Temperature, pH, Concentration and Hardness*  
*[The concentration of the sanitizing solution was initially too strong (>500ppm). In addition, the water of the sanitizing solution was too cold (40.5 degrees F). A quaternary sanitizing solution shall have a minimum temperature of 75 degrees F (24 degrees C) ; and have a concentration as specified by the manufacturer's label.]*

16B. Food contact surfaces cleaned and sanitized NMT 194° F, NLT 180° F

16C. Mechanical warewashing equipment sanitization food contact surfaces, equip., utensils

17. Proper disposition of returned, previously served reconditions, & unsafe food

Time/Temperature Control for Safety Food (TCS Food)	IN	OUT	N/O	N/A	COS	REPEAT

Inspector

Acknowledged Receipt : Tim Viveiros

Page 2 of 6

## Food Establishment Inspection Report - FDA

### Time/Temperature Control for Safety Food (TCS Food)

	IN	OUT	N/O	N/A	COS	REPEAT
18A. Proper cooking time & temperatures	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
18B. Whole meat cooking and serving, storing	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
18C. Microwave cooking of raw animal foods	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
19. Proper reheating procedures for hot holding	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
20. Proper cooling time & temperatures	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
21. Proper hot holding temperatures	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
22. Proper cold holding temperatures	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
23. Proper Date Marking	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
23B. TCS Foods Disposition	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
24A. Time as a public health control: procedures	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
24B. Time as a public health control: temperatures & discarding food	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
24C. Time as a public health control: highly susceptible population (HSP)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

### Consumer Advisory

	IN	OUT	N/O	N/A	COS	REPEAT
25. Consumer advisory provided for raw or undercooked foods	<input type="radio"/>	<input type="radio"/>		<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

### Highly Susceptible Populations (HSP)

	IN	OUT	N/O	N/A	COS	REPEAT
26A. Pasteurized foods used; prohibited foods not offered	<input type="radio"/>	<input type="radio"/>		<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
26B. Reservice of foods	<input type="radio"/>	<input type="radio"/>		<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

### Chemical

	IN	OUT	N/O	N/A	COS	REPEAT
27. Food additives: approved and properly used	<input type="radio"/>	<input type="radio"/>		<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
28A. Toxic substances identified, stored and used	<input checked="" type="radio"/>	<input type="radio"/>		<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
28B. Poisonous materials, sanitizers, additives, medicines restriction, separation, storage	<input checked="" type="radio"/>	<input type="radio"/>		<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
28C. Conditions of Use: law	<input checked="" type="radio"/>	<input type="radio"/>		<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

### Conformance with Approved Procedures

	IN	OUT	N/O	N/A	COS	REPEAT
29A. Compliance with variance, specialized process, & HACCP plan	<input type="radio"/>	<input type="radio"/>		<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
29B. Treating juice- HACCP, reduced oxygen packaging w/out variance, conformance with approved procedures	<input type="radio"/>	<input type="radio"/>		<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
29C. When HACCP plan is required	<input type="radio"/>	<input type="radio"/>		<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

### GOOD RETAIL PRACTICES

Good Retail Practices are preventative measures to control the addition of pathogens, chemicals, and physical objects into foods.

IN = In compliance    OUT = not in compliance    COS - corrected on -site during inspection    REPEAT = repeat violation

### Safe Food and Water

	IN	OUT	N/O	N/A	COS	REPEAT
30. Pasteurized eggs used where required	<input type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>

*Mason*

Inspector

Acknowledged Receipt : Tim Viveiros

Page 3 of 6

## Food Establishment Inspection Report - FDA

Safe Food and Water	IN	OUT	N/O	N/A	COS	REPEAT
31A. Water & ice from approved source	<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>
31B. Sampling, alternative water supply	<input type="radio"/>	<input type="radio"/>		<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
31C. Sampling report	<input type="radio"/>	<input type="radio"/>		<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
32. Variance obtained for specialized processing methods	<input type="radio"/>	<input type="radio"/>		<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
Food Temperature Control	IN	OUT	N/O	N/A	COS	REPEAT
33A. Proper cooling methods used; adequate equipment for temperature control	<input type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>
33B. Frozen food	<input type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>
34. Plant food properly cooked for hot holding	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
35. Approved thawing methods used	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
36A. Thermometers provided and accurate	<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>
36B. Thermometers function properly	<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>
Food Identification	IN	OUT	COS	REPEAT		
37A. Food properly labeled; original container	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>		
37B. Food labels, labeling of ingredients	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>		
Prevention of Food Contamination	IN	OUT	COS	REPEAT		
38A. Insects, rodents, & animals not present	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>		
38B. Handling prohibition, controlling pests, prohibiting animals	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>		
39A. Contamination prevented during food storage	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>		
39B. Food display; ice used as an exterior coolant prohibited as an ingredient	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>		
39C. Consumer self-service operations- utensils and monitoring	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>		
40A. Personal cleanliness- prohibition jewelry	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>		
40B. Maintenance of fingernails	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>		
41. Wiping cloths; properly used and stored	<input type="radio"/>	<input checked="" type="radio"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>		
<div style="display: flex;"> <div style="flex: 1; border-right: 1px solid black; padding-right: 5px;"> <b>Fail Notes</b> </div> <div style="flex: 2; padding-left: 5px;"> <p>3-304.14 <i>Wiping Cloths, Use Limitation</i>  <i>[Wiping cloths were observed stored on the prep tables. Wiping cloths in-use for wiping counters and other equipment surfaces shall be held between uses in a chemical sanitizer solution at a concentration specified by the manufacturer (read the label). Wiping cloths used for surfaces in contact with raw animal foods shall be kept separate from cloths used for other purposes. Containers of chemical sanitizing solution in which wet wiping cloths are held between uses shall be stored off the floor and used in a manner that prevents contamination of food, equipment, utensils, linens, and single-use service items (to-go containers). If a surface needs to be wiped from crumbs or other ingredients (not allergens or raw meats - to remove allergens, soapy water MUST be used) use a disposable paper towel. Use once and dispose. Avoid using wiping cloths under cutting boards and to cover foods. Instead use a non-slip mat under the cutting boards. Using a paper towel is acceptable.]</i></p> </div> </div>						
42A. Washing Produce - following chemical manufacturers label	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>		

Inspector

Acknowledged Receipt : Tim Viveiros

Page 4 of 6

## Food Establishment Inspection Report - FDA

Prevention of Food Contamination			IN	OUT	COS	REPEAT	
42B. Washing produce			<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>	
42C. Washing produce- chemicals			<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Proper Use of Utensils			IN	OUT	COS	REPEAT	
43. In-use utensils; properly stored			<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>	
44. Utensils, equipment & linens; properly stored, dried, and handled			<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>	
45A. Single-use/ single service articles properly stored and used, required			<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>	
45B. Single-use/service articles use limitation, kitchenware and tableware preventing contamination			<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>	
46. Gloves used properly			<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Utensils, Equipment and Vending			IN	OUT	COS	REPEAT	
47A. Food & non-food contact surfaces cleanable			<input type="radio"/>	<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>	
<div style="display: flex; align-items: flex-start;"> <div style="border-right: 1px solid black; padding-right: 5px; margin-right: 5px;"> <i>Fail Notes</i> </div> <div> <div style="display: flex; align-items: flex-start;"> <div style="border-right: 1px solid black; padding-right: 5px; margin-right: 5px;"> 4-501.12 </div> <div> <i>Cutting Surfaces</i>  <i>[Some of the cutting boards have become scratched and scored making them difficult to clean and sanitize. As a result pathogenic microorganisms transmissible through food may build up or accumulate. These microorganisms may be transferred to foods that are prepared on such surfaces. Replace all worn cutting boards.]</i> </div> </div> </div> </div>							
47B. Food contact surfaces /utensils cleanability, molluscan shellfish tanks, consumer self-service			<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>	
47C. Properly designed characteristics: food and non-food contact surfaces, molluscan shellfish tanks			<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>	
48A. Warewashing facilities: installed, maintained, & used; test strips			<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>	
48B. Operational warewashing machines			<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>	
49. Non-food contact surfaces clean			<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Physical Facilities			IN	OUT	N/A	COS	REPEAT
50. Hot & cold water available; adequate pressure			<input checked="" type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>
51A. Plumbing installed; proper backflow devices			<input checked="" type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>
51B. Prohibiting a cross-connection, inspection and servicing system			<input checked="" type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>
51C. Approved system and cleanable fixtures, service sink			<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
52A. Sewage and waste water properly disposed			<input checked="" type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>
52B. Grease traps easily accessible for cleaning			<input checked="" type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>
52C. Removing mobile food establishment waste			<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
53A. Toilet facilities; properly constructed, supplied, & cleaned			<input checked="" type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>
53B. Toilet tissue availability			<input checked="" type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>
54. Garbage & refuse properly disposed; facilities maintained			<input checked="" type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>
55A. Physical facilities installed, maintained, & clean			<input type="radio"/>	<input checked="" type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>

Masson

Inspector

Acknowledged Receipt : Tim Viveiros

Page 5 of 6

## Food Establishment Inspection Report - FDA

### Physical Facilities

IN OUT N/A COS REPEAT

*Fail Notes*    6-501.114    *Maintaining Premises, Unnecessary Items and Litter*  
*[There is a slicer that is no longer being used. The premises shall be free of items that are unnecessary to the operation or maintenance of the establishment, such as equipment that is nonfunctional or no longer used.]*

55B. Private homes and living or sleeping quarters, use prohibition	⊙	○	□	□
56. Adequate ventilation & lighting; designated areas used	⊙	○	□	□

### MASSACHUSETTS ONLY REGULATIONS

Rules and Regulations adopted for use in Massachusetts only.

#### Facilities

IN OUT COS REPEAT

57A. Catering	○	○	□	□
57B. When plans are reviewed, prerequisite for operations- valid permit	○	○	□	□
57C. Contents of plans and specifications, preoperational inspections	○	○	□	□
58. Mobile Food Operations	○	○	□	□
59. Temporary Food Establishments	○	○	□	□
60. Residential Kitchens	○	○	□	□

#### Procedures

IN OUT COS REPEAT

61. Anti-choking Procedures	○	○	□	□
62. Tobacco Products: Notice and Sale	○	○	□	□
63. Food Allergy Awareness Requirements	○	○	□	□

*Masson*

Inspector

Acknowledged Receipt : Tim Viveiros

Page 6 of 6



City of Newton  
Health and Human Services  
Deborah Youngblood, PhD, Commissioner  
1000 Commonwealth Ave Newton, MA 02459  
(617) 796-1420



Public Health  
Prevent, Promote, Protect

Food Establishment Inspection Report - FDA

Insp Date: 3/17/2017  
Business: Peirce School  
170 Temple St.

Newton, MA 02465

Business ID: 1N2305

Inspection: CN000310

Section: 4

Phone: 617-559-9630

Inspector: RS764 John McNally

Reason: 1-Routine

Results: Follow-up

Inspection Summary

Official Order for Correction: Based on an inspection today, the items checked indicate violations of 105 CMR 590.000/ 2009 Federal Food Code. This report, when signed below by the Commissioner of Health / Agent constitutes an order by the Commissioner of Health. Failure to correct violations cited in this report may result in suspension or revocation of the food establishment permit and cessation of food establishment operations. If aggrieved by this order, you have the right to a hearing. The request must be in writing and submitted to the Commissioner of Health at the above address within 10 days of receipt of this order.

Est. Type 1 - Food Svc Establish License/Permit # \_\_\_\_\_ Risk Category 02 Risk Level Observed 02 Low

FOODBORNE ILLNESS RISK FACTORS AND PUBLIC HEALTH INTERVENTIONS

Compliance status: IN = in compliance OUT = not in compliance N/O = not observed N/A = not applicable

Marked in appropriate box for COS and/or R. COS = corrected on-site during inspection R = repeat violation

Risk factors are improper practices or procedures identified as the most prevalent contributing factors of foodborne illness or injury. Public Health Interventions are control measures to prevent foodborne illnesses or injury.

Supervision

1A. PIC Present

B. Cert. food manager, knowledge, no critical violations

C. Duties of PIC

IN OUT N/O N/A COS REPEAT

☒ ☐ ☐ ☐ ☐ ☐

☒ ☐ ☐ ☐ ☐ ☐

☒ ☐ ☐ ☐ ☐ ☐

Employee Health

2. Management, food employee and conditional employee; knowledge, responsibilities and reporting

3. Proper use of restriction and exclusion

IN OUT N/O N/A COS REPEAT

☒ ☐ ☐ ☐ ☐ ☐

☒ ☐ ☐ ☐ ☐ ☐

Good Hygienic Practices

4A. Proper eating, tasting, drinking, or tobacco use

B. Preventing contamination when tasting

5. No discharge from eyes, nose, and mouth

IN OUT N/O N/A COS REPEAT

☒ ☐ ☐ ☐ ☐ ☐

☒ ☐ ☐ ☐ ☐ ☐

☒ ☐ ☐ ☐ ☐ ☐

*John McNally*

Inspector

Acknowledged Receipt : ARLISA BENNETT

Page 1 of 5

## Food Establishment Inspection Report - FDA

### Preventing Contamination by Hands

6A. Hands clean & properly washed

B. Where to wash, hand antiseptics

7. No bare hand contact with RTE food or a pre-approved alternative procedure properly allowed

8A. Adequate handwashing sinks properly supplied and accessible

B. Handwashing sinks accessible with proper signage, handwashing aids

C. Conveniently located handwashing sink

IN	OUT	N/O	N/A	COS	REPEAT
<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>
<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>
<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>
<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>
<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>

### Approved Sources

9A. Milk, eggs, juice, bottled water, hermetically sealed food

B. Fish and shellfish

10. Food received at proper temperature

11. Food in good condition, safe, & unadulterated

IN	OUT	N/O	N/A	COS	REPEAT
<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>

### Protection from Contamination

12A. Food separated & protected

B. Gloves, use limitation, one task- contaminated

13A. Food-contact surfaces: cleaned & sanitized 171° F

B. Food contact surfaces cleaned and sanitized NMT 194° F, NLT 180° F

C. Mechanical warewashing equipment sanitization food contact surfaces, equip., utensils

14. Proper disposition of returned, previously served reconditions, & unsafe food

IN	OUT	N/O	N/A	COS	REPEAT
<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input checked="" type="radio"/>	<input type="radio"/>		<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="radio"/>	<input type="radio"/>		<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="radio"/>	<input type="radio"/>		<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>

### Potentially Hazardous Food Time/Temperature

15. Proper cooking time & temperatures

16. Proper reheating procedures for hot holding

17. Proper cooling time & temperatures

18. Proper hot holding temperatures

Fail Notes | 3-501.16 (A) \*Hot PHFs Maintained at or Above 135oF  
[Metro hot holding unit set at 170f. Food was at 128F.  
This unit is not holding 135F as required.]

19. Proper cold holding temperatures

20. Time as a public health control: procedures & record

IN	OUT	N/O	N/A	COS	REPEAT
<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

### Highly Susceptible Populations

21. Pasteurized foods used; prohibited foods not offered

### Chemical

22. Food additives: approved and properly used

23A. Toxic substances properly identified, stored and used

IN	OUT	N/O	N/A	COS	REPEAT
<input type="radio"/>	<input type="radio"/>		<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input checked="" type="radio"/>	<input type="radio"/>		<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input checked="" type="radio"/>	<input type="radio"/>		<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

*John Mc Gally AS*

Inspector

Acknowledged Receipt : ARLISA BENNETT

Page 2 of 5

## Food Establishment Inspection Report - FDA

Chemical	IN	OUT	N/O	N/A	COS	REPEAT
B. Restriction presence and use, restriction and storage of medicines	<input checked="" type="radio"/>	<input type="radio"/>		<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
C. Storage- other personal care items	<input checked="" type="radio"/>	<input type="radio"/>		<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

### GOOD RETAIL PRACTICES

Good Retail Practices are preventative measures to control the addition of pathogens, chemicals, and physical objects into foods.

IN = In compliance OUT = not in compliance COS - corrected on -site during inspection REPEAT = repeat violation

Safe Food and Water	IN	OUT	N/O	N/A	COS	REPEAT
24. Water & ice from approved source	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
Food Temperature Control	IN	OUT	N/O	N/A	COS	REPEAT
25A. Proper cooling methods used; adequate equipment for temperature control	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
B. Frozen food	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
26. Plant food properly cooked for hot holding	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
27. Approved thawing methods used	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
28A. Thermometers provided and accurate	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
B. Thermometers function properly	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

Food Identification	IN	OUT	COS	REPEAT
29A. Food properly labeled; original container	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
B. Food labels, labeling of ingredients	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

Prevention of Food Contamination	IN	OUT	COS	REPEAT
30A. Insects, rodents, & animals not present	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
B. Handling prohibition, controlling pests, prohibiting animals	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
31A. Contamination prevented during food storage	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
B. Food display; ice used as an exterior coolant prohibited as an ingredient	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
C. Consumer self-service operations- utensils and monitoring	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
32A. Personal cleanliness- prohibition jewelry	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
B. Maintenance of fingernails	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
33. Wiping cloths; properly used and stored	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
34. Washing fruits & vegetables	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

Proper Use of Utensils	IN	OUT	COS	REPEAT
35. In-use utensils; properly stored	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
36. Utensils, equipment & linens; properly stored, dried, and handled	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
37A. Single-use/ single service articles properly stored and used, required	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

*John Mc Haller*

Inspector

Acknowledged Receipt : ARLISA BENNETT

Page 3 of 5

## Food Establishment Inspection Report - FDA

### Proper Use of Utensils

B. Single-use/service articles use limitation, kitchenware and tableware preventing contamination

IN OUT COS REPEAT

☒ ☐ ☐ ☐

38. Gloves used properly

☒ ☐ ☐ ☐

### Utensils, Equipment and Vending

39A. Food & non-food contact surfaces cleanable

☒ ☐ ☐ ☐

B. Food contact surfaces /utensils cleanability, molluscan shellfish tanks, consumer self-servic

☒ ☐ ☐ ☐

C. Properly designed characteristics: food and non-food contact surfaces, molluscan shellfish tanks

☒ ☐ ☐ ☐

40A. Warewashing facilities: installed, maintained, & used; test strips

☒ ☐ ☐ ☐

B. Operational warewashing machines

☐ ☐ ☐ ☐

41. Non-food contact surfaces clean

☒ ☐ ☐ ☐

### Physical Facilities

IN OUT N/O N/A COS REPEAT

42. Hot & cold water available; adequate pressure

☒ ☐ ☐ ☐

43A. Plumbing installed; proper backflow devices

☐ ☒ ☐ ☐

*Fail Notes*    5-202.13    \*Backflow Prevention, Air Gap  
[hose connected to above sink outdoor style faucet.  
There is no backflow prevention seen on this feed.]

5-205.15 (A)    \*System Maintained in Good Repair  
[p-trap on 3-bay drain leaks.]

B. Prohibiting a cross-connection, non-drinking water, system maintained in good repair

☒ ☐ ☐ ☐

C. Approved system and cleanable fixtures, service sink

☒ ☐ ☐ ☐

44A. Sewage and waste water properly disposed

☒ ☐ ☐ ☐

B. Grease traps easily accessible for cleaning

☒ ☐ ☐ ☐

45A. Toilet facilities; properly constructed, supplied, & cleaned

☒ ☐ ☐ ☐

B. Toilet tissue availability

☒ ☐ ☐ ☐

46. Garbage & refuse properly disposed; facilities maintained

☒ ☐ ☐ ☐

47A. Physical facilities installed, maintained, & clean

☒ ☐ ☐ ☐

B. Cleaning maintenance tools, preventing contamination

☒ ☐ ☐ ☐

48. Adequate ventilation & lighting; designated areas used

☒ ☐ ☐ ☐

### MASSACHUSETTS ONLY REGULATIONS

Rules and Regulations adopted for use in Massachusetts only.

#### Facilities

49A. When plans are reviewed, prerequisite for operations- valid permit

IN OUT COS REPEAT

☐ ☐ ☐ ☐

B. Contents of plans and specifications, preoperational inspections

☐ ☐ ☐ ☐

#### Procedures

IN OUT COS REPEAT

*John Mc Haller*

Inspector

Acknowledged Receipt : ARLISA BENNETT

Page 4 of 5

## Food Establishment Inspection Report - FDA

### Procedures

50. Anti-choking Procedures

51. Tobacco Products: Notice and Sale

IN OUT COS REPEAT

☐ ☐ ☐ ☐

☐ ☐ ☐ ☐

*John Mc Haller*

Inspector

Acknowledged Receipt : ARLISA BENNETT

Page 5 of 5



City of Newton  
Health and Human Services  
Deborah Youngblood, PhD, Commissioner  
1000 Commonwealth Ave Newton, MA 02459  
(617) 796-1420



Public Health  
Prevent. Promote. Protect.

Food Establishment Inspection Report - FDA

Insp Date: 1/18/2018 Business ID: 1N2305

Business: Peirce School  
170 Temple St.

Newton, MA 02465

Inspection: 6N000011

Section: 4

Phone: 617-559-9630

Inspector: 1N11123 Nicola Assan

Reason: 1-Routine

Results: No Follow-up R2

Inspection Summary

Official Order for Correction: Based on an inspection today, the items checked indicate violations of 105 CMR 590.000/ 2013 Federal Food Code. This report, when signed below by the Commissioner of Health / Agent constitutes an order by the Commissioner of Health. Failure to correct violations cited in this report may result in suspension or revocation of the food establishment permit and cessation of food establishment operations. If aggrieved by this order, you have the right to a hearing. The request must be in writing and submitted to the Commissioner of Health at the above address within 10 days of receipt of this order.

Est. Type 1 - Food Svc Establis License/Permit # \_\_\_\_\_ Risk Category 02 Risk Level Observed 02 Low

Foodborne Illness Complaint Investigated (All) ☐ Involving More Than Two Persons ☐

FOODBORNE ILLNESS RISK FACTORS AND PUBLIC HEALTH INTERVENTIONS

Compliance status: IN = in compliance OUT = not in compliance N/O = not observed N/A = not applicable

Marked in appropriate box for COS and/or R. COS = corrected on-site during inspection R = repeat violation

Risk factors are improper practices or procedures identified as the most prevalent contributing factors of foodborne illness or injury. Public Health Interventions are control measures to prevent foodborne illnesses or injury.

Supervision

1. PIC Present, Knowledge and Duties

IN	OUT	N/O	N/A	COS	REPEAT
<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>

2. Certified Food Protection Manager

<input checked="" type="radio"/>	<input type="radio"/>		<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
----------------------------------	-----------------------	--	-----------------------	--------------------------	--------------------------

Employee Health / Responding to Contamination Events

3A. Employee Health: PIC Knowledge, Responsibilities & Reporting

<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>
----------------------------------	-----------------------	--	--	--------------------------	--------------------------

3B. Employee Reporting to PIC

<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>
----------------------------------	-----------------------	--	--	--------------------------	--------------------------

4. Proper Use of Restriction & Exclusion

<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>
----------------------------------	-----------------------	--	--	--------------------------	--------------------------

5. Clean-up of Vomiting and Diarrheal Events

<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>
----------------------------------	-----------------------	--	--	--------------------------	--------------------------

Good Hygienic Practices

6A. Proper eating, tasting, drinking, or tobacco use

IN	OUT	N/O	N/A	COS	REPEAT
<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>

6B. Preventing contamination when tasting

<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>
----------------------------------	-----------------------	-----------------------	--	--------------------------	--------------------------

Inspector

Acknowledged Receipt :

Page 1 of 7

## Food Establishment Inspection Report - FDA

### Good Hygienic Practices

7. No discharge from eyes, nose, and mouth

IN	OUT	N/O	N/A	COS	REPEAT
<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>

### Control of Hands as a Vehicle of Contamination

8A. Hands clean & properly washed

IN	OUT	N/O	N/A	COS	REPEAT
<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>

8B. Where to wash, hand antiseptics

IN	OUT	N/O	N/A	COS	REPEAT
<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>

9. No bare hand contact with RTE food or a pre-approved alternative procedure properly allowed

IN	OUT	N/O	N/A	COS	REPEAT
<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

10A. Adequate handwashing sinks properly supplied and accessible

IN	OUT	N/O	N/A	COS	REPEAT
<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>

10B. Handwashing sinks accesible with proper signage, handwashing aids

IN	OUT	N/O	N/A	COS	REPEAT
<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>

### Approved Sources

11A. Milk, eggs, juice, bottled water, hermetically sealed food, game animals

IN	OUT	N/O	N/A	COS	REPEAT
<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

11B. Packaged foods, labeling, whole muscle beef

IN	OUT	N/O	N/A	COS	REPEAT
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

11C. Obtaining raw fish, packaged meat & poultry, eggs

IN	OUT	N/O	N/A	COS	REPEAT
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

12A. Food received at proper temperature

IN	OUT	N/O	N/A	COS	REPEAT
<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

12B. Shipping and receiving frozen food

IN	OUT	N/O	N/A	COS	REPEAT
<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

13. Food in good condition, honestly presented, safe, & unadulterated

IN	OUT	N/O	N/A	COS	REPEAT
<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>

13B. Food package integrity

IN	OUT	N/O	N/A	COS	REPEAT
<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>

14A. Required records available: shellstock tags, parasite destruction

IN	OUT	N/O	N/A	COS	REPEAT
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

14B. Missing shellstock tags, destruction

IN	OUT	N/O	N/A	COS	REPEAT
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

14C. Parasite destruction- storing raw/partially cooked fish

IN	OUT	N/O	N/A	COS	REPEAT
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

### Protection from Contamination

15A. Food separated & protected

IN	OUT	N/O	N/A	COS	REPEAT
<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

15B. Cleaning equip/utensils/food containers

IN	OUT	N/O	N/A	COS	REPEAT
<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

16A. Food-contact surfaces: cleaned & sanitized immersion 171° F and above

IN	OUT	N/O	N/A	COS	REPEAT
<input checked="" type="radio"/>	<input type="radio"/>		<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

16B. Food contact surfaces cleaned and sanitized NMT 194° F, NLT 180° F

IN	OUT	N/O	N/A	COS	REPEAT
<input type="radio"/>	<input type="radio"/>		<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

16C. Mechanical warewashing equipment sanitization food contact surfaces, equip., utensils

IN	OUT	N/O	N/A	COS	REPEAT
<input type="radio"/>	<input type="radio"/>		<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

17. Proper disposition of returned, previously served reconditions, & unsafe food

IN	OUT	N/O	N/A	COS	REPEAT
<input type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>

### Time/Temperature Control for Safety Food (TCS Food)

18A. Proper cooking time & temperatures

IN	OUT	N/O	N/A	COS	REPEAT
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

18B. Whole meat cooking and serving, storing

IN	OUT	N/O	N/A	COS	REPEAT
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

18C. Microwave cooking of raw animal foods

IN	OUT	N/O	N/A	COS	REPEAT
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

19. Proper reheating procedures for hot holding

IN	OUT	N/O	N/A	COS	REPEAT
<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

20. Proper cooling time & temperatures

IN	OUT	N/O	N/A	COS	REPEAT
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

21. Proper hot holding temperatures

IN	OUT	N/O	N/A	COS	REPEAT
<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>

***This item has Notes. See Footnote 1 at end of questionnaire.***

Inspector

Acknowledged Receipt :

Page 2 of 7

## Food Establishment Inspection Report - FDA

Time/Temperature Control for Safety Food (TCS Food)

IN OUT N/O N/A COS REPEAT

Fail Notes 3-501.16 (A) *\*Hot TCS foods Maintained at or Above 135oF, Also for whole meat roasts (130F and above)  
[The temperature of the food in the Metro hot holding unit was recorded as 129.9 deg F. Food for hot holding must be maintained at a temperature of at least 135 deg F to prevent the growth of pathogens which can result in foodborne illness.]*

- |   |                                  |                       |                       |                                  |                          |                          |
|---|----------------------------------|-----------------------|-----------------------|----------------------------------|--------------------------|--------------------------|
| 22. Proper cold holding temperatures                                      | <input checked="" type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/>            | <input type="checkbox"/> | <input type="checkbox"/> |
| 23. Proper Date Marking   | <input checked="" type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/>            | <input type="checkbox"/> | <input type="checkbox"/> |
| 23B. TCS Foods Disposition  | <input checked="" type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/>            | <input type="checkbox"/> | <input type="checkbox"/> |
| 24A. Time as a public health control: procedures                          | <input type="radio"/>            | <input type="radio"/> | <input type="radio"/> | <input checked="" type="radio"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 24B. Time as a public health control: temperatures & discarding food      | <input type="radio"/>            | <input type="radio"/> | <input type="radio"/> | <input checked="" type="radio"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 24C. Time as a public health control: highly susceptible population (HSP) | <input type="radio"/>            | <input type="radio"/> | <input type="radio"/> | <input checked="" type="radio"/> | <input type="checkbox"/> | <input type="checkbox"/> |

Consumer Advisory

IN OUT N/O N/A COS REPEAT

- |   |                       |                       |                       |                                  |                          |                          |
|---|-----------------------|-----------------------|-----------------------|----------------------------------|--------------------------|--------------------------|
| 25. Consumer advisory provided for raw or undercooked foods | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input checked="" type="radio"/> | <input type="checkbox"/> | <input type="checkbox"/> |
|---|-----------------------|-----------------------|-----------------------|----------------------------------|--------------------------|--------------------------|

Highly Susceptible Populations (HSP)

IN OUT N/O N/A COS REPEAT

- |   |                       |                       |                       |                                  |                          |                          |
|---|-----------------------|-----------------------|-----------------------|----------------------------------|--------------------------|--------------------------|
| 26A. Pasteurized foods used; prohibited foods not offered | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input checked="" type="radio"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 26B. Reservice of foods                                   | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input checked="" type="radio"/> | <input type="checkbox"/> | <input type="checkbox"/> |

Chemical

IN OUT N/O N/A COS REPEAT

- |   |                                  |                       |                       |                                  |                          |                          |
|---|----------------------------------|-----------------------|-----------------------|----------------------------------|--------------------------|--------------------------|
| 27. Food additives: approved and properly used  | <input type="radio"/>            | <input type="radio"/> | <input type="radio"/> | <input checked="" type="radio"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 28A. Toxic substances identified, stored and used   | <input checked="" type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/>            | <input type="checkbox"/> | <input type="checkbox"/> |
| 28B. Poisonous materials, sanitizers, additives, medicines restriction, separation, storage | <input checked="" type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/>            | <input type="checkbox"/> | <input type="checkbox"/> |
| 28C. Conditions of Use: law   | <input checked="" type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/>            | <input type="checkbox"/> | <input type="checkbox"/> |

Conformance with Approved Procedures

IN OUT N/O N/A COS REPEAT

- |   |                       |                       |                       |                                  |                          |                          |
|---|-----------------------|-----------------------|-----------------------|----------------------------------|--------------------------|--------------------------|
| 29A. Compliance with variance, specialized process, & HACCP plan  | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input checked="" type="radio"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 29B. Treating juice- HACCP, reduced oxygen packaging w/out variance, conformance with approved procedures | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input checked="" type="radio"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 29C. When HACCP plan is required  | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input checked="" type="radio"/> | <input type="checkbox"/> | <input type="checkbox"/> |

GOOD RETAIL PRACTICES

Good Retail Practices are preventative measures to control the addition of pathogens, chemicals, and physical objects into foods.

IN = In compliance OUT = not in compliance COS - corrected on -site during inspection REPEAT = repeat violation

Safe Food and Water

IN OUT N/O N/A COS REPEAT

- |  |                                  |                       |                       |                                  |                          |                          |
|--|----------------------------------|-----------------------|-----------------------|----------------------------------|--------------------------|--------------------------|
| 30. Pasteurized eggs used where required | <input checked="" type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/>            | <input type="checkbox"/> | <input type="checkbox"/> |
| 31A. Water & ice from approved source    | <input checked="" type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/>            | <input type="checkbox"/> | <input type="checkbox"/> |
| 31B. Sampling, alternative water supply  | <input type="radio"/>            | <input type="radio"/> | <input type="radio"/> | <input checked="" type="radio"/> | <input type="checkbox"/> | <input type="checkbox"/> |

Inspector

Acknowledged Receipt :

Page 3 of 7

## Food Establishment Inspection Report - FDA

<b>Safe Food and Water</b>	IN	OUT	N/O	N/A	COS	REPEAT
----------------------------	----	-----	-----	-----	-----	--------

31C. Sampling report

☐ ☐ ☒ ☐ ☐

32. Variance obtained for specialized processing methods

☐ ☐ ☒ ☐ ☐

<b>Food Temperature Control</b>	IN	OUT	N/O	N/A	COS	REPEAT
---------------------------------	----	-----	-----	-----	-----	--------

33A. Proper cooling methods used; adequate equipment for temperature control

☐ ☐ ☐ ☐ ☐ ☐

33B. Frozen food

☐ ☐ ☐ ☐ ☐ ☐

34. Plant food properly cooked for hot holding

☒ ☐ ☐ ☐ ☐ ☐

35. Approved thawing methods used

☐ ☐ ☐ ☒ ☐ ☐

36A. Thermometers provided and accurate

☒ ☐ ☐ ☐ ☐ ☐

36B. Thermometers function properly

☒ ☐ ☐ ☐ ☐ ☐

<b>Food Identification</b>	IN	OUT	COS	REPEAT
----------------------------	----	-----	-----	--------

37A. Food properly labeled; original container

☐ ☒ ☐ ☐

<i>Fail Notes</i>	3-302.12	<i>Food Storage Containers Identified with Common Name of Food                      [The salad dressings had been removed from their original containers.                      Food that has been removed from their original container must be                      labelled so that they are easily identifiable. The mistaken use of food                      from unlabelled containers could result in severe medical                      consequences. ]</i>
-------------------	----------	--

37B. Food labels, labeling of ingredients

☒ ☐ ☐ ☐

<b>Prevention of Food Contamination</b>	IN	OUT	COS	REPEAT
---	----	-----	-----	--------

38A. Insects, rodents, & animals not present

☒ ☐ ☐ ☐

38B. Handling prohibition, controlling pests, prohibiting animals

☒ ☐ ☐ ☐

39A. Contamination prevented during food storage

☒ ☐ ☐ ☐

39B. Food display; ice used as an exterior coolant prohibited as an ingredient

☒ ☐ ☐ ☐

39C. Consumer self-service operations- utensils and monitoring

☒ ☐ ☐ ☐

40A. Personal cleanliness- prohibition jewelry

☒ ☐ ☐ ☐

40B. Maintenance of fingernails

☒ ☐ ☐ ☐

41. Wiping cloths; properly used and stored

☒ ☐ ☐ ☐

42A. Washing Produce - following chemical manufacturers label

☒ ☐ ☐ ☐

42B. Washing produce

☒ ☐ ☐ ☐

42C. Washing produce- chemicals

☒ ☐ ☐ ☐

<b>Proper Use of Utensils</b>	IN	OUT	COS	REPEAT
-------------------------------	----	-----	-----	--------

43. In-use utensils; properly stored

☒ ☐ ☐ ☐

44. Utensils, equipment & linens; properly stored, dried, and handled

☒ ☐ ☐ ☐

45A. Single-use/ single service articles properly stored and used, required

☒ ☐ ☐ ☐

45B. Single-use/service articles use limitation, kitchenware and tableware preventing contamination

☒ ☐ ☐ ☐

Inspector \_\_\_\_\_

Acknowledged Receipt : \_\_\_\_\_

Page 4 of 7

## Food Establishment Inspection Report - FDA

### Proper Use of Utensils

46. Gloves used properly

IN	OUT	COS	REPEAT
<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

### Utensils, Equipment and Vending

47A. Food & non-food contact surfaces cleanable

IN	OUT	COS	REPEAT
<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

47B. Food contact surfaces /utensils cleanability, molluscan shellfish tanks, consumer self-service

IN	OUT	COS	REPEAT
<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

47C. Properly designed characteristics: food and non-food contact surfaces, molluscan shellfish tanks

IN	OUT	COS	REPEAT
<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

48A. Warewashing facilities: installed, maintained, & used; test strips

IN	OUT	COS	REPEAT
<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

48B. Operational warewashing machines

IN	OUT	COS	REPEAT
<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

***This item has Notes. See Footnote 2 at end of questionnaire.***

49. Non-food contact surfaces clean

IN	OUT	COS	REPEAT
<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

### Physical Facilities

50. Hot & cold water available; adequate pressure

IN	OUT	N/A	COS	REPEAT
<input checked="" type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>

51A. Plumbing installed; proper backflow devices

IN	OUT	N/A	COS	REPEAT
<input checked="" type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>

51B. Prohibiting a cross-connection, inspection and servicing system

IN	OUT	N/A	COS	REPEAT
<input checked="" type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>

51C. Approved system and cleanable fixtures, service sink

IN	OUT	N/A	COS	REPEAT
<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

52A. Sewage and waste water properly disposed

IN	OUT	N/A	COS	REPEAT
<input checked="" type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>

52B. Grease traps easily accessible for cleaning

IN	OUT	N/A	COS	REPEAT
<input checked="" type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>

52C. Removing mobile food establishment waste

IN	OUT	N/A	COS	REPEAT
<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

53A. Toilet facilities; properly constructed, supplied, & cleaned

IN	OUT	N/A	COS	REPEAT
<input checked="" type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>

53B. Toilet tissue availability

IN	OUT	N/A	COS	REPEAT
<input checked="" type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>

54. Garbage & refuse properly disposed; facilities maintained

IN	OUT	N/A	COS	REPEAT
<input checked="" type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>

55A. Physical facilities installed, maintained, & clean

IN	OUT	N/A	COS	REPEAT
<input checked="" type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>

55B. Private homes and living or sleeping quarters, use prohibition

IN	OUT	N/A	COS	REPEAT
<input checked="" type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>

56. Adequate ventilation & lighting; designated areas used

IN	OUT	N/A	COS	REPEAT
<input checked="" type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>

### MASSACHUSETTS ONLY REGULATIONS

Rules and Regulations adopted for use in Massachusetts only.

### Facilities

57A. Catering

IN	OUT	COS	REPEAT
<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

57B. When plans are reviewed, prerequisite for operations- valid permit

IN	OUT	COS	REPEAT
<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

57C. Contents of plans and specifications, preoperational inspections

IN	OUT	COS	REPEAT
<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

58. Mobile Food Operations

IN	OUT	COS	REPEAT
<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

59. Temporary Food Establishments

IN	OUT	COS	REPEAT
<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

60. Residential Kitchens

IN	OUT	COS	REPEAT
<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

Inspector

Acknowledged Receipt :

Page 5 of 7

Food Establishment Inspection Report - FDA

Procedures

61. Anti-choking Procedures

62. Tobacco Products: Notice and Sale

63. Food Allergy Awareness Requirements

IN OUT COS REPEAT

☐ ☐ ☐ ☐

☐ ☐ ☐ ☐

☐ ☐ ☐ ☐

Inspector

Acknowledged Receipt :

## Food Establishment Inspection Report - FDA

### **Footnote 1**

**Notes:**

Met a representative of Sodexo on my way out of the school who informed me that he is aware that the hot holding units in some of the schools are not maintaining the required temperature. He is therefore undertaking a program of repair of these units and will replace if necessary.

### **Footnote 2**

**Notes:**

The school kitchen does not have a dishwasher installed. It has a 3 bay sink.

---

Inspector

---

Acknowledged Receipt :

Page 7 of 7



City of Newton  
Health and Human Services  
Deborah Youngblood, PhD, Commissioner  
1000 Commonwealth Ave Newton, MA 02459  
(617) 796-1420



Public Health  
Prevent, Promote, Protect.

Food Establishment Inspection Report - FDA

Insp Date: 10/4/2018  
Business: Peirce School  
170 Temple St.

Newton, MA 02465

Business ID: 1N2305

Inspection: 6N000049

Section: 4

Phone: 617-559-9630

Inspector: 1N11123 Nicola Assan

Reason: 1-Routine

Results: No Follow-up R2

Inspection Summary

Official Order for Correction: Based on an inspection today, the items checked indicate violations of 105 CMR 590.000/ 2013 Federal Food Code. This report, when signed below by the Commissioner of Health / Agent constitutes an order by the Commissioner of Health. Failure to correct violations cited in this report may result in suspension or revocation of the food establishment permit and cessation of food establishment operations. If aggrieved by this order, you have the right to a hearing. The request must be in writing and submitted to the Commissioner of Health at the above address within 10 days of receipt of this order.

Est. Type 1 - Food Svc Establis License/Permit # \_\_\_\_\_ Risk Category 02 Risk Level Observed 02 Low

Foodborne Illness Complaint Investigated (All) ☐ Involving More Than Two Persons ☐

FOODBORNE ILLNESS RISK FACTORS AND PUBLIC HEALTH INTERVENTIONS

Compliance status: IN = in compliance OUT = not in compliance N/O = not observed N/A = not applicable

Marked in appropriate box for COS and/or R. COS = corrected on-site during inspection R = repeat violation

Risk factors are improper practices or procedures identified as the most prevalent contributing factors of foodborne illness or injury. Public Health Interventions are control measures to prevent foodborne illnesses or injury.

Supervision

1. PIC Present, Knowledge and Duties

IN	OUT	N/O	N/A	COS	REPEAT
<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>

2. Certified Food Protection Manager

<input checked="" type="radio"/>	<input type="radio"/>		<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
----------------------------------	-----------------------	--	-----------------------	--------------------------	--------------------------

Employee Health / Responding to Contamination Events

3A. Employee Health: PIC Knowledge, Responsibilities & Reporting

<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>
----------------------------------	-----------------------	--	--	--------------------------	--------------------------

3B. Employee Reporting to PIC

<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>
----------------------------------	-----------------------	--	--	--------------------------	--------------------------

4. Proper Use of Restriction & Exclusion

<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>
----------------------------------	-----------------------	--	--	--------------------------	--------------------------

5. Clean-up of Vomiting and Diarrheal Events

<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>
----------------------------------	-----------------------	--	--	--------------------------	--------------------------

Good Hygienic Practices

6A. Proper eating, tasting, drinking, or tobacco use

IN	OUT	N/O	N/A	COS	REPEAT
<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>

6B. Preventing contamination when tasting

<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>
----------------------------------	-----------------------	-----------------------	--	--------------------------	--------------------------

*Assan*

Inspector

Acknowledged Receipt : Tim Viveiros

Page 1 of 6

## Food Establishment Inspection Report - FDA

### Good Hygienic Practices

7. No discharge from eyes, nose, and mouth

IN	OUT	N/O	N/A	COS	REPEAT
<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>

### Control of Hands as a Vehicle of Contamination

8A. Hands clean & properly washed

IN	OUT	N/O	N/A	COS	REPEAT
<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>

8B. Where to wash, hand antiseptics

IN	OUT	N/O	N/A	COS	REPEAT
<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>

9. No bare hand contact with RTE food or a pre-approved alternative procedure properly allowed

IN	OUT	N/O	N/A	COS	REPEAT
<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

10A. Adequate handwashing sinks properly supplied and accessible

IN	OUT	N/O	N/A	COS	REPEAT
<input type="radio"/>	<input checked="" type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>

Fail Notes

5-205.11

Accessibility, Operation and Maintenance

[There were boxes in front of the handsink. You must keep handsinks accessible at all items and not block access or store items on or in them.]

10B. Handwashing sinks accesible with proper signage, handwashing aids

IN	OUT	N/O	N/A	COS	REPEAT
<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>

### Approved Sources

11A. Milk, eggs, juice, bottled water, hermetically sealed food, game animals

IN	OUT	N/O	N/A	COS	REPEAT
<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

11B. Packaged foods, labeling, whole muscle beef

IN	OUT	N/O	N/A	COS	REPEAT
<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

11C. Obtaining raw fish, packaged meat & poultry, eggs

IN	OUT	N/O	N/A	COS	REPEAT
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

12A. Food received at proper temperature

IN	OUT	N/O	N/A	COS	REPEAT
<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

12B. Shipping and receiving frozen food

IN	OUT	N/O	N/A	COS	REPEAT
<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

13. Food in good condition, honestly presented, safe, & unadulterated

IN	OUT	N/O	N/A	COS	REPEAT
<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>

13B. Food package integrity

IN	OUT	N/O	N/A	COS	REPEAT
<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>

14A. Required records available: shellstock tags, parasite destruction

IN	OUT	N/O	N/A	COS	REPEAT
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

14B. Missing shellstock tags, destruction

IN	OUT	N/O	N/A	COS	REPEAT
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

14C. Parasite destruction- storing raw/partially cooked fish

IN	OUT	N/O	N/A	COS	REPEAT
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

### Protection from Contamination

15A. Food separated & protected

IN	OUT	N/O	N/A	COS	REPEAT
<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

15B. Cleaning equip/utensils/food containers

IN	OUT	N/O	N/A	COS	REPEAT
<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

16A. Food-contact surfaces: cleaned & sanitized immersion 171° F and above

IN	OUT	N/O	N/A	COS	REPEAT
<input checked="" type="radio"/>	<input type="radio"/>		<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

16B. Food contact surfaces cleaned and sanitized NMT 194° F, NLT 180° F

IN	OUT	N/O	N/A	COS	REPEAT
<input checked="" type="radio"/>	<input type="radio"/>		<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

16C. Mechanical warewashing equipment sanitization food contact surfaces, equip., utensils

IN	OUT	N/O	N/A	COS	REPEAT
<input type="radio"/>	<input type="radio"/>		<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

17. Proper disposition of returned, previously served reconditions, & unsafe food

IN	OUT	N/O	N/A	COS	REPEAT
<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>

### Time/Temperature Control for Safety Food (TCS Food)

18A. Proper cooking time & temperatures

IN	OUT	N/O	N/A	COS	REPEAT
<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

18B. Whole meat cooking and serving, storing

IN	OUT	N/O	N/A	COS	REPEAT
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

18C. Microwave cooking of raw animal foods

IN	OUT	N/O	N/A	COS	REPEAT
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

19. Proper reheating procedures for hot holding

IN	OUT	N/O	N/A	COS	REPEAT
<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

*Assan*

Inspector

Acknowledged Receipt : Tim Viveiros

Page 2 of 6

## Food Establishment Inspection Report - FDA

### Time/Temperature Control for Safety Food (TCS Food)

	IN	OUT	N/O	N/A	COS	REPEAT
20. Proper cooling time & temperatures	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
21. Proper hot holding temperatures	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
22. Proper cold holding temperatures	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
23. Proper Date Marking	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
23B. TCS Foods Disposition	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
24A. Time as a public health control: procedures	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
24B. Time as a public health control: temperatures & discarding food	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
24C. Time as a public health control: highly susceptible population (HSP)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

### Consumer Advisory

	IN	OUT	N/O	N/A	COS	REPEAT
25. Consumer advisory provided for raw or undercooked foods	<input type="radio"/>	<input type="radio"/>		<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

### Highly Susceptible Populations (HSP)

	IN	OUT	N/O	N/A	COS	REPEAT
26A. Pasteurized foods used; prohibited foods not offered	<input type="radio"/>	<input type="radio"/>		<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
26B. Reservice of foods	<input type="radio"/>	<input type="radio"/>		<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

### Chemical

	IN	OUT	N/O	N/A	COS	REPEAT
27. Food additives: approved and properly used	<input type="radio"/>	<input type="radio"/>		<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
28A. Toxic substances identified, stored and used	<input checked="" type="radio"/>	<input type="radio"/>		<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
28B. Poisonous materials, sanitizers, additives, medicines restriction, separation, storage	<input checked="" type="radio"/>	<input type="radio"/>		<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
28C. Conditions of Use: law	<input checked="" type="radio"/>	<input type="radio"/>		<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

### Conformance with Approved Procedures

	IN	OUT	N/O	N/A	COS	REPEAT
29A. Compliance with variance, specialized process, & HACCP plan	<input type="radio"/>	<input type="radio"/>		<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
29B. Treating juice- HACCP, reduced oxygen packaging w/out variance, conformance with approved procedures	<input type="radio"/>	<input type="radio"/>		<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
29C. When HACCP plan is required	<input type="radio"/>	<input type="radio"/>		<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

### GOOD RETAIL PRACTICES

Good Retail Practices are preventative measures to control the addition of pathogens, chemicals, and physical objects into foods.

IN = In compliance    OUT = not in compliance    COS - corrected on -site during inspection    REPEAT = repeat violation

### Safe Food and Water

	IN	OUT	N/O	N/A	COS	REPEAT
30. Pasteurized eggs used where required	<input type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>
31A. Water & ice from approved source	<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>
31B. Sampling, alternative water supply	<input type="radio"/>	<input type="radio"/>		<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
31C. Sampling report	<input type="radio"/>	<input type="radio"/>		<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
32. Variance obtained for specialized processing methods	<input type="radio"/>	<input type="radio"/>		<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

*Assan*

Inspector

Acknowledged Receipt : Tim Viveiros

Page 3 of 6

## Food Establishment Inspection Report - FDA

### Food Temperature Control

	IN	OUT	N/O	N/A	COS	REPEAT
33A. Proper cooling methods used; adequate equipment for temperature control	<input type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>
33B. Frozen food	<input type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>
34. Plant food properly cooked for hot holding	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
35. Approved thawing methods used	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
36A. Thermometers provided and accurate	<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>
36B. Thermometers function properly	<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>

### Food Identification

	IN	OUT	COS	REPEAT
37A. Food properly labeled; original container	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
37B. Food labels, labeling of ingredients	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

### Prevention of Food Contamination

	IN	OUT	COS	REPEAT
38A. Insects, rodents, & animals not present	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
38B. Handling prohibition, controlling pests, prohibiting animals	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
39A. Contamination prevented during food storage	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
39B. Food display; ice used as an exterior coolant prohibited as an ingredient	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
39C. Consumer self-service operations- utensils and monitoring	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
40A. Personal cleanliness- prohibition jewelry	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
40B. Maintenance of fingernails	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
41. Wiping cloths; properly used and stored	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
42A. Washing Produce - following chemical manufacturers label	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
42B. Washing produce	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
42C. Washing produce- chemicals	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

### Proper Use of Utensils

	IN	OUT	COS	REPEAT
43. In-use utensils; properly stored	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
44. Utensils, equipment & linens; properly stored, dried, and handled	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
45A. Single-use/ single service articles properly stored and used, required	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
45B. Single-use/service articles use limitation, kitchenware and tableware preventing contamination	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
46. Gloves used properly	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

### Utensils, Equipment and Vending

	IN	OUT	COS	REPEAT
47A. Food & non-food contact surfaces cleanable	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
47B. Food contact surfaces /utensils cleanability, molluscan shellfish tanks, consumer self-service	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
47C. Properly designed characteristics: food and non-food contact surfaces, molluscan shellfish tanks	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>



Inspector

Acknowledged Receipt : Tim Viveiros

Page 4 of 6

## Food Establishment Inspection Report - FDA

### Utensils, Equipment and Vending

48A. Warewashing facilities: installed, maintained, & used; test strips

IN OUT COS REPEAT  
☐ ☒ ☐ ☐

**Fail Notes**

4-501.19

Manual warewashing equipment, wash solution temperature  
 [The temperature of the water for washing in the 3 bay sink compartment was 80.6 degrees fahrenheit. The temperature of the wash solution in manual warewashing equipment shall be maintained at not less than 110 degrees fahrenheit or the temperature specified on the cleaning agent manufacturer's label instructions.]

48B. Operational warewashing machines

☐ ☐ ☐ ☐

49. Non-food contact surfaces clean

☒ ☐ ☐ ☐

### Physical Facilities

50. Hot & cold water available; adequate pressure

IN OUT N/A COS REPEAT  
☒ ☐ ☐ ☐

51A. Plumbing installed; proper backflow devices

☒ ☐ ☐ ☐

51B. Prohibiting a cross-connection, inspection and servicing system

☒ ☐ ☐ ☐

51C. Approved system and cleanable fixtures, service sink

☐ ☐ ☐ ☐ ☐

52A. Sewage and waste water properly disposed

☒ ☐ ☐ ☐

52B. Grease traps easily accessible for cleaning

☐ ☐ ☐ ☐

52C. Removing mobile food establishment waste

☐ ☐ ☒ ☐ ☐

53A. Toilet facilities; properly constructed, supplied, & cleaned

☐ ☒ ☐ ☐

**Fail Notes**

5-501.17

Toilet room receptacle, covered- sanitary napkins  
 [There was no cover on the receptacle in the toilet room. A toilet room used by females shall be provided with a covered receptacle for the disposal of sanitary napkins.]

53B. Toilet tissue availability

☒ ☐ ☐ ☐

54. Garbage & refuse properly disposed; facilities maintained

☒ ☐ ☐ ☐

55A. Physical facilities installed, maintained, & clean

☒ ☐ ☐ ☐

55B. Private homes and living or sleeping quarters, use prohibition

☒ ☐ ☐ ☐

56. Adequate ventilation & lighting; designated areas used

☒ ☐ ☐ ☐

### MASSACHUSETTS ONLY REGULATIONS

Rules and Regulations adopted for use in Massachusetts only.

#### Facilities

57A. Catering

IN OUT COS REPEAT  
☐ ☐ ☐ ☐

57B. When plans are reviewed, prerequisite for operations- valid permit

☐ ☐ ☐ ☐

57C. Contents of plans and specifications, preoperational inspections

☐ ☐ ☐ ☐

58. Mobile Food Operations

☐ ☐ ☐ ☐

59. Temporary Food Establishments

☐ ☐ ☐ ☐

60. Residential Kitchens

☐ ☐ ☐ ☐

#### Procedures

IN OUT COS REPEAT

Inspector

Acknowledged Receipt : Tim Viveiros

Page 5 of 6

## Food Establishment Inspection Report - FDA

### Procedures

61. Anti-choking Procedures

62. Tobacco Products: Notice and Sale

63. Food Allergy Awareness Requirements

IN OUT COS REPEAT

☐ ☐ ☐ ☐

☐ ☐ ☐ ☐

☐ ☐ ☐ ☐



Inspector

Acknowledged Receipt : Tim Viveiros

Page 6 of 6



City of Newton  
Health and Human Services  
Deborah Youngblood, PhD, Commissioner  
1000 Commonwealth Ave Newton, MA 02459  
(617) 796-1420



Public Health  
Prevent. Promote. Protect.

Food Establishment Inspection Report - FDA

Insp Date: 5/2/2019  
Business: Peirce School  
170 Temple St.

Business ID: 1N2305

Newton, MA 02465

Inspection: 6N000110

Section: 4

Phone: 617-559-9630

Inspector: 1N11123 Nicola Assan

Reason: 1-Routine

Results: No Follow-up R2

Inspection Summary

Official Order for Correction: Based on an inspection today, the items checked indicate violations of 105 CMR 590.000/ 2013 Federal Food Code. This report, when signed below by the Commissioner of Health / Agent constitutes an order by the Commissioner of Health. Failure to correct violations cited in this report may result in suspension or revocation of the food establishment permit and cessation of food establishment operations. If aggrieved by this order, you have the right to a hearing. The request must be in writing and submitted to the Commissioner of Health at the above address within 10 days of receipt of this order.

Est. Type 1 - Food Svc Establish License/Permit # \_\_\_\_\_ Risk Category 02 Risk Level Observed 02 Low

Foodborne Illness Complaint Investigated (All) ☐ Involving More Than Two Persons ☐

FOODBORNE ILLNESS RISK FACTORS AND PUBLIC HEALTH INTERVENTIONS

Compliance status: IN = in compliance OUT = not in compliance N/O = not observed N/A = not applicable

Marked in appropriate box for COS and/or R. COS = corrected on-site during inspection R = repeat violation

Risk factors are improper practices or procedures identified as the most prevalent contributing factors of foodborne illness or injury. Public Health Interventions are control measures to prevent foodborne illnesses or injury.

Supervision

1. PIC Present, Knowledge and Duties

IN OUT N/O N/A COS REPEAT

⊙ ○ □ □

2. Certified Food Protection Manager

⊙ ○ ○ □ □

Employee Health / Responding to Contamination Events

3A. Employee Health: PIC Knowledge, Responsibilities & Reporting

IN OUT N/O N/A COS REPEAT

⊙ ○ □ □

3B. Employee Reporting to PIC

⊙ ○ □ □

4. Proper Use of Restriction & Exclusion

⊙ ○ □ □

5. Clean-up of Vomiting and Diarrheal Events

⊙ ○ □ □

Good Hygienic Practices

6A. Proper eating, tasting, drinking, or tobacco use

IN OUT N/O N/A COS REPEAT

⊙ ○ ○ □ □

6B. Preventing contamination when tasting

⊙ ○ ○ □ □

Assan

Inspector

Acknowledged Receipt : Tim Viveiros

Page 1 of 5

## Food Establishment Inspection Report - FDA

### Good Hygienic Practices

7. No discharge from eyes, nose, and mouth

IN	OUT	N/O	N/A	COS	REPEAT
<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>

### Control of Hands as a Vehicle of Contamination

8A. Hands clean & properly washed

IN	OUT	N/O	N/A	COS	REPEAT
<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>

8B. Where to wash, hand antiseptics

IN	OUT	N/O	N/A	COS	REPEAT
<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>

9. No bare hand contact with RTE food or a pre-approved alternative procedure properly allowed

IN	OUT	N/O	N/A	COS	REPEAT
<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

10A. Adequate handwashing sinks properly supplied and accessible

IN	OUT	N/O	N/A	COS	REPEAT
<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>

10B. Handwashing sinks accessible with proper signage, handwashing aids

IN	OUT	N/O	N/A	COS	REPEAT
<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>

### Approved Sources

11A. Milk, eggs, juice, bottled water, hermetically sealed food, game animals

IN	OUT	N/O	N/A	COS	REPEAT
<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

11B. Packaged foods, labeling, whole muscle beef

IN	OUT	N/O	N/A	COS	REPEAT
<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

11C. Obtaining raw fish, packaged meat & poultry, eggs

IN	OUT	N/O	N/A	COS	REPEAT
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

12A. Food received at proper temperature

IN	OUT	N/O	N/A	COS	REPEAT
<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

12B. Shipping and receiving frozen food

IN	OUT	N/O	N/A	COS	REPEAT
<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

13. Food in good condition, honestly presented, safe, & unadulterated

IN	OUT	N/O	N/A	COS	REPEAT
<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>

13B. Food package integrity

IN	OUT	N/O	N/A	COS	REPEAT
<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>

14A. Required records available: shellstock tags, parasite destruction

IN	OUT	N/O	N/A	COS	REPEAT
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

14B. Missing shellstock tags, destruction

IN	OUT	N/O	N/A	COS	REPEAT
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

14C. Parasite destruction- storing raw/partially cooked fish

IN	OUT	N/O	N/A	COS	REPEAT
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

### Protection from Contamination

15A. Food separated & protected

IN	OUT	N/O	N/A	COS	REPEAT
<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

15B. Cleaning equip/utensils/food containers

IN	OUT	N/O	N/A	COS	REPEAT
<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

16A. Food-contact surfaces: cleaned & sanitized immersion 171° F and above

IN	OUT	N/O	N/A	COS	REPEAT
<input checked="" type="radio"/>	<input type="radio"/>		<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

16B. Food contact surfaces cleaned and sanitized NMT 194° F, NLT 180° F

IN	OUT	N/O	N/A	COS	REPEAT
<input checked="" type="radio"/>	<input type="radio"/>		<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

16C. Mechanical warewashing equipment sanitization food contact surfaces, equip., utensils

IN	OUT	N/O	N/A	COS	REPEAT
<input checked="" type="radio"/>	<input type="radio"/>		<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

17. Proper disposition of returned, previously served reconditions, & unsafe food

IN	OUT	N/O	N/A	COS	REPEAT
<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>

### Time/Temperature Control for Safety Food (TCS Food)

18A. Proper cooking time & temperatures

IN	OUT	N/O	N/A	COS	REPEAT
<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

18B. Whole meat cooking and serving, storing

IN	OUT	N/O	N/A	COS	REPEAT
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

18C. Microwave cooking of raw animal foods

IN	OUT	N/O	N/A	COS	REPEAT
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

19. Proper reheating procedures for hot holding

IN	OUT	N/O	N/A	COS	REPEAT
<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

20. Proper cooling time & temperatures

IN	OUT	N/O	N/A	COS	REPEAT
<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

21. Proper hot holding temperatures

IN	OUT	N/O	N/A	COS	REPEAT
<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

*Assan*

Inspector

Acknowledged Receipt : Tim Viveiros

Page 2 of 5

## Food Establishment Inspection Report - FDA

### Time/Temperature Control for Safety Food (TCS Food)

	IN	OUT	N/O	N/A	COS	REPEAT
22. Proper cold holding temperatures	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
23. Proper Date Marking	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
23B. TCS Foods Disposition	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
24A. Time as a public health control: procedures	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
24B. Time as a public health control: temperatures & discarding food	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
24C. Time as a public health control: highly susceptible population (HSP)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

### Consumer Advisory

	IN	OUT	N/O	N/A	COS	REPEAT
25. Consumer advisory provided for raw or undercooked foods	<input type="radio"/>	<input type="radio"/>		<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

### Highly Susceptible Populations (HSP)

	IN	OUT	N/O	N/A	COS	REPEAT
26A. Pasteurized foods used; prohibited foods not offered	<input type="radio"/>	<input type="radio"/>		<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
26B. Reservice of foods	<input type="radio"/>	<input type="radio"/>		<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

### Chemical

	IN	OUT	N/O	N/A	COS	REPEAT
27. Food additives: approved and properly used	<input type="radio"/>	<input type="radio"/>		<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
28A. Toxic substances identified, stored and used	<input checked="" type="radio"/>	<input type="radio"/>		<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
28B. Poisonous materials, sanitizers, additives, medicines restriction, separation, storage	<input checked="" type="radio"/>	<input type="radio"/>		<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
28C. Conditions of Use: law	<input checked="" type="radio"/>	<input type="radio"/>		<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

### Conformance with Approved Procedures

	IN	OUT	N/O	N/A	COS	REPEAT
29A. Compliance with variance, specialized process, & HACCP plan	<input type="radio"/>	<input type="radio"/>		<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
29B. Treating juice- HACCP, reduced oxygen packaging w/out variance, conformance with approved procedures	<input type="radio"/>	<input type="radio"/>		<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
29C. When HACCP plan is required	<input type="radio"/>	<input type="radio"/>		<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

### GOOD RETAIL PRACTICES

Good Retail Practices are preventative measures to control the addition of pathogens, chemicals, and physical objects into foods.

IN = In compliance    OUT = not in compliance    COS - corrected on -site during inspection    REPEAT = repeat violation

### Safe Food and Water

	IN	OUT	N/O	N/A	COS	REPEAT
30. Pasteurized eggs used where required	<input type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>
31A. Water & ice from approved source	<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>
31B. Sampling, alternative water supply	<input type="radio"/>	<input type="radio"/>		<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
31C. Sampling report	<input type="radio"/>	<input type="radio"/>		<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
32. Variance obtained for specialized processing methods	<input type="radio"/>	<input type="radio"/>		<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

### Food Temperature Control

	IN	OUT	N/O	N/A	COS	REPEAT
33A. Proper cooling methods used; adequate equipment for temperature control	<input type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>

*Assan*

Inspector

Acknowledged Receipt : Tim Viveiros

Page 3 of 5

## Food Establishment Inspection Report - FDA

Food Temperature Control	IN	OUT	N/O	N/A	COS	REPEAT
33B. Frozen food	<input type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>
34. Plant food properly cooked for hot holding	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
35. Approved thawing methods used	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
36A. Thermometers provided and accurate	<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>
36B. Thermometers function properly	<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>

Food Identification	IN	OUT	COS	REPEAT
37A. Food properly labeled; original container		<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>
37B. Food labels, labeling of ingredients		<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>

Prevention of Food Contamination	IN	OUT	COS	REPEAT
38A. Insects, rodents, & animals not present		<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>
38B. Handling prohibition, controlling pests, prohibiting animals		<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>
39A. Contamination prevented during food storage		<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>
39B. Food display; ice used as an exterior coolant prohibited as an ingredient		<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>
39C. Consumer self-service operations- utensils and monitoring		<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>
40A. Personal cleanliness- prohibition jewelry		<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>
40B. Maintenance of fingernails		<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>
41. Wiping cloths; properly used and stored		<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>
42A. Washing Produce - following chemical manufacturers label		<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>
42B. Washing produce		<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>
42C. Washing produce- chemicals		<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>

Proper Use of Utensils	IN	OUT	COS	REPEAT
43. In-use utensils; properly stored		<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>
44. Utensils, equipment & linens; properly stored, dried, and handled		<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>
45A. Single-use/ single service articles properly stored and used, required		<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>
45B. Single-use/service articles use limitation, kitchenware and tableware preventing contamination		<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>
46. Gloves used properly		<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>

Utensils, Equipment and Vending	IN	OUT	COS	REPEAT
47A. Food & non-food contact surfaces cleanable		<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>
47B. Food contact surfaces /utensils cleanability, molluscan shellfish tanks, consumer self-service		<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>
47C. Properly designed characteristics: food and non-food contact surfaces, molluscan shellfish tanks		<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>
48A. Warewashing facilities: installed, maintained, & used; test strips		<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>
48B. Operational warewashing machines		<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>

*Assan*

Inspector

Acknowledged Receipt : Tim Viveiros

Page 4 of 5

## Food Establishment Inspection Report - FDA

### Utensils, Equipment and Vending

49. Non-food contact surfaces clean

IN	OUT	COS	REPEAT
<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

### Physical Facilities

50. Hot & cold water available; adequate pressure

IN	OUT	N/A	COS	REPEAT
<input checked="" type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>

51A. Plumbing installed; proper backflow devices

<input checked="" type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>
----------------------------------	-----------------------	--	--------------------------	--------------------------

51B. Prohibiting a cross-connection, inspection and servicing system

<input checked="" type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>
----------------------------------	-----------------------	--	--------------------------	--------------------------

51C. Approved system and cleanable fixtures, service sink

<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
----------------------------------	-----------------------	-----------------------	--------------------------	--------------------------

52A. Sewage and waste water properly disposed

<input checked="" type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>
----------------------------------	-----------------------	--	--------------------------	--------------------------

52B. Grease traps easily accessible for cleaning

<input checked="" type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>
----------------------------------	-----------------------	--	--------------------------	--------------------------

52C. Removing mobile food establishment waste

<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
-----------------------	-----------------------	----------------------------------	--------------------------	--------------------------

53A. Toilet facilities; properly constructed, supplied, & cleaned

<input type="radio"/>	<input checked="" type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>
-----------------------	----------------------------------	--	--------------------------	--------------------------

#### Fail Notes

5-501.17

*Toilet room receptacle, covered- sanitary napkins*

*[The receptacle in the toilet room was not covered. A toilet room used by females shall be provided with a covered receptacle for the removal of sanitary napkins.]*

53B. Toilet tissue availability

<input checked="" type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>
----------------------------------	-----------------------	--	--------------------------	--------------------------

54. Garbage & refuse properly disposed; facilities maintained

<input checked="" type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>
----------------------------------	-----------------------	--	--------------------------	--------------------------

55A. Physical facilities installed, maintained, & clean

<input checked="" type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>
----------------------------------	-----------------------	--	--------------------------	--------------------------

55B. Private homes and living or sleeping quarters, use prohibition

<input checked="" type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>
----------------------------------	-----------------------	--	--------------------------	--------------------------

56. Adequate ventilation & lighting; designated areas used

<input checked="" type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>
----------------------------------	-----------------------	--	--------------------------	--------------------------

### MASSACHUSETTS ONLY REGULATIONS

Rules and Regulations adopted for use in Massachusetts only.

#### Facilities

57A. Catering

IN	OUT	COS	REPEAT
<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

57B. When plans are reviewed, prerequisite for operations- valid permit

<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
-----------------------	-----------------------	--------------------------	--------------------------

57C. Contents of plans and specifications, preoperational inspections

<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
-----------------------	-----------------------	--------------------------	--------------------------

58. Mobile Food Operations

<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
-----------------------	-----------------------	--------------------------	--------------------------

59. Temporary Food Establishments

<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
-----------------------	-----------------------	--------------------------	--------------------------

60. Residential Kitchens

<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
-----------------------	-----------------------	--------------------------	--------------------------

#### Procedures

61. Anti-choking Procedures

IN	OUT	COS	REPEAT
<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

62. Tobacco Products: Notice and Sale

<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
-----------------------	-----------------------	--------------------------	--------------------------

63. Food Allergy Awareness Requirements

<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
-----------------------	-----------------------	--------------------------	--------------------------

*Assan*

Inspector

Acknowledged Receipt : Tim Viveiros

Page 5 of 5



**City of Newton**  
**Health and Human Services**  
 Deborah Youngblood, PhD, Commissioner  
 1000 Commonwealth Ave Newton, MA 02459  
 (617) 796-1420



**Public Health**  
 Prevent. Promote. Protect.

**Food Establishment Inspection Report - FDA**

**Insp Date:** 12/9/2016    **Business ID:** 1N2365  
**Business:** Underwood School  
 101 Vernon St.

Newton, MA 02458

**Inspection:** 5N000265  
**Section:** 1  
**Phone:** 617-559-9660  
**Inspector:** 1N81219 Kyle Simpson  
**Reason:** 1-Routine  
**Results:** No Follow-up

**Inspection Summary**

Official Order for Correction: Based on an inspection today, the items checked indicate violations of 105 CMR 590.000/ 2009 Federal Food Code. This report, when signed below by the Commissioner of Health / Agent constitutes an order by the Commissioner of Health. Failure to correct violations cited in this report may result in suspension or revocation of the food establishment permit and cessation of food establishment operations. If aggrieved by this order, you have the right to a hearing. The request must be in writing and submitted to the Commissioner of Health at the above address within 10 days of receipt of this order.

Est. Type 1 - Food Svc Establish License/Permit # \_\_\_\_\_ Risk Category 02 Risk Level Observed 02 Low

**FOODBORNE ILLNESS RISK FACTORS AND PUBLIC HEALTH INTERVENTIONS**

Compliance status: IN = in compliance OUT = not in compliance N/O = not observed N/A = not applicable

Marked in appropriate box for COS and/or R. COS = corrected on-site during inspection R = repeat violation

Risk factors are improper practices or procedures identified as the most prevalent contributing factors of foodborne illness or injury. Public Health Interventions are control measures to prevent foodborne illnesses or injury.

**Supervision**

1A. PIC Present

IN	OUT	N/O	N/A	COS	REPEAT
<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>

B. Cert. food manager, knowledge, no critical violations

<input type="radio"/>	<input checked="" type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>
-----------------------	----------------------------------	--	--	--------------------------	--------------------------

*Fail Notes*    2-102.20    *Food Protection Manager Certification*  
*[Employee did not have her servesafe certificate. All employees need to be trained in servesafe.]*

C. Duties of PIC

<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>
----------------------------------	-----------------------	--	--	--------------------------	--------------------------

**Employee Health**

2. Management, food employee and conditional employee; knowledge, responsibilities and reporting

IN	OUT	N/O	N/A	COS	REPEAT
<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

3. Proper use of restriction and exclusion

<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>
----------------------------------	-----------------------	--	--	--------------------------	--------------------------

**Good Hygienic Practices**

4A. Proper eating, tasting, drinking, or tobacco use

IN	OUT	N/O	N/A	COS	REPEAT
<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>

*Kyle Simpson*

Inspector

Acknowledged Receipt : Tranace Andrews

Page 1 of 5

## Food Establishment Inspection Report - FDA

Good Hygienic Practices		IN	OUT	N/O	N/A	COS	REPEAT
B. Preventing contamination when tasting		<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>
5. No discharge from eyes, nose, and mouth		<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>
Preventing Contamination by Hands		IN	OUT	N/O	N/A	COS	REPEAT
6A. Hands clean & properly washed		<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>
B. Where to wash, hand antiseptics		<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>
Fail Notes	2-301.15 <i>Where to wash</i> <i>[There is a sign at the 3-bay that says you can use that sink to wash hands and drink from. Only use the handsink for washing hands.]</i>						
7. No bare hand contact with RTE food or a pre-approved alternative procedure properly allowed		<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
8A. Adequate handwashing sinks properly supplied and accessible		<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>
B. Handwashing sinks accesible with proper signage, handwashing aids		<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>
C. Conveniently located handwashing sink		<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>
Approved Sources		IN	OUT	N/O	N/A	COS	REPEAT
9A. Milk, eggs, juice, bottled water, hermetically sealed food		<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>
B. Fish and shellfish		<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
10. Food received at proper temperature		<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
11. Food in good condition, safe, & unadulterated		<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>
Protection from Contamination		IN	OUT	N/O	N/A	COS	REPEAT
12A. Food separated & protected		<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
B. Gloves, use limitation, one task- contaminated		<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
13A. Food-contact surfaces: cleaned & sanitized 171° F		<input checked="" type="radio"/>	<input type="radio"/>		<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
B. Food contact surfaces cleaned and sanitized NMT 194° F, NLT 180° F		<input checked="" type="radio"/>	<input type="radio"/>		<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
C. Mechanical warewashing equipment sanitization food contact surfaces, equip., utensils		<input checked="" type="radio"/>	<input type="radio"/>		<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
14. Proper disposition of returned, previously served reconditions, & unsafe food		<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>
Potentially Hazardous Food Time/Temperature		IN	OUT	N/O	N/A	COS	REPEAT
15. Proper cooking time & temperatures		<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
16. Proper reheating procedures for hot holding		<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
17. Proper cooling time & temperatures		<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
18. Proper hot holding temperatures		<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
19. Proper cold holding temperatures		<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
20. Time as a public health control: procedures & record		<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
Highly Susceptible Populations		IN	OUT	N/O	N/A	COS	REPEAT
21. Pasteurized foods used; prohibited foods not offered		<input type="radio"/>	<input type="radio"/>		<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

*Thyle*

Inspector

Acknowledged Receipt : Tranace Andrews

Page 2 of 5

## Food Establishment Inspection Report - FDA

Chemical	IN	OUT	N/O	N/A	COS	REPEAT
22. Food additives: approved and properly used	<input type="radio"/>	<input type="radio"/>		<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
23A. Toxic substances properly identified, stored and used	<input checked="" type="radio"/>	<input type="radio"/>		<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
B. Restriction presence and use, restriction and storage of medicines	<input checked="" type="radio"/>	<input type="radio"/>		<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
C. Storage- other personal care items	<input checked="" type="radio"/>	<input type="radio"/>		<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

### GOOD RETAIL PRACTICES

Good Retail Practices are preventative measures to control the addition of pathogens, chemicals, and physical objects into foods.

IN = In compliance OUT = not in compliance COS - corrected on -site during inspection REPEAT = repeat violation

Safe Food and Water	IN	OUT	N/O	N/A	COS	REPEAT
24. Water & ice from approved source	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

Food Temperature Control	IN	OUT	N/O	N/A	COS	REPEAT
25A. Proper cooling methods used; adequate equipment for temperature control	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
B. Frozen food	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
26. Plant food properly cooked for hot holding	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
27. Approved thawing methods used	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
28A. Thermometers provided and accurate	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
B. Thermometers function properly	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

Food Identification	IN	OUT	COS	REPEAT
29A. Food properly labeled; original container		<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
B. Food labels, labeling of ingredients		<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

Prevention of Food Contamination	IN	OUT	COS	REPEAT
30A. Insects, rodents, & animals not present		<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
B. Handling prohibition, controlling pests, prohibiting animals		<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
31A. Contamination prevented during food storage		<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
B. Food display; ice used as an exterior coolant prohibited as an ingredient		<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
C. Consumer self-service operations- utensils and monitoring		<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
32A. Personal cleanliness- prohibition jewelry		<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
B. Maintenance of fingernails		<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
33. Wiping cloths; properly used and stored		<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
34. Washing fruits & vegetables		<input type="radio"/>	<input checked="" type="radio"/>	<input type="checkbox"/>

*Fail Notes* | 3-302.15 *Washing Fruits and Vegetables*  
*[Currently fruit is not being washed. Be sure that fruit is being washed before being put out to be sold.]*

Proper Use of Utensils	IN	OUT	COS	REPEAT
------------------------	----	-----	-----	--------

Inspector

Acknowledged Receipt : Tranace Andrews

Page 3 of 5

## Food Establishment Inspection Report - FDA

### Proper Use of Utensils

	IN	OUT	COS	REPEAT
35. In-use utensils; properly stored	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
36. Utensils, equipment & linens; properly stored, dried, and handled	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
37A. Single-use/ single service articles properly stored and used, required	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
B. Single-use/service articles use limitation, kitchenware and tableware preventing contamination	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
38. Gloves used properly	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

### Utensils, Equipment and Vending

	IN	OUT	COS	REPEAT
39A. Food & non-food contact surfaces cleanable	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
B. Food contact surfaces /utensils cleanability, molluscan shellfish tanks, consumer self-service	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
C. Properly designed characteristics: food and non-food contact surfaces, molluscan shellfish tanks	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
40A. Warewashing facilities: installed, maintained, & used; test strips	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
B. Operational warewashing machines	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
41. Non-food contact surfaces clean	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

### Physical Facilities

	IN	OUT	N/O	N/A	COS	REPEAT
42. Hot & cold water available; adequate pressure	<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>
43A. Plumbing installed; proper backflow devices	<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>
B. Prohibiting a cross-connection, non-drinking water, system maintained in good repair	<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>
C. Approved system and cleanable fixtures, service sink	<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>
44A. Sewage and waste water properly disposed	<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>
B. Grease traps easily accessible for cleaning	<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>
45A. Toilet facilities; properly constructed, supplied, & cleaned	<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>
B. Toilet tissue availability	<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>
46. Garbage & refuse properly disposed; facilities maintained	<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>
47A. Physical facilities installed, maintained, & clean	<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>
B. Cleaning maintenance tools, preventing contamination	<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>
48. Adequate ventilation & lighting; designated areas used	<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>

### MASSACHUSETTS ONLY REGULATIONS

Rules and Regulations adopted for use in Massachusetts only.

#### Facilities

	IN	OUT	COS	REPEAT
49A. When plans are reviewed, prerequisite for operations- valid permit	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
B. Contents of plans and specifications, preoperational inspections	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

#### Procedures

IN OUT COS REPEAT

*Tranace Andrews*

Inspector

Acknowledged Receipt : Tranace Andrews

Page 4 of 5

## Food Establishment Inspection Report - FDA

### Procedures

50. Anti-choking Procedures

51. Tobacco Products: Notice and Sale

IN OUT COS REPEAT

☐ ☐ ☐ ☐

☐ ☐ ☐ ☐



Inspector

Acknowledged Receipt : Tranace Andrews

Page 5 of 5



City of Newton  
Health and Human Services  
Deborah Youngblood, PhD, Commissioner  
1000 Commonwealth Ave Newton, MA 02459  
(617) 796-1420



Public Health  
Prevent. Promote. Protect.

Food Establishment Inspection Report - FDA

Insp Date: 1/11/2018 Business ID: 1N2365

Business: Underwood School  
101 Vernon St.

Newton, MA 02458

Inspection: 6N000010

Section: 1

Phone: 559-9660

Inspector: 1N11123 Nicola Assan

Reason: 1-Routine

Results: No Follow-up R2

Inspection Summary

Official Order for Correction: Based on an inspection today, the items checked indicate violations of 105 CMR 590.000/ 2013 Federal Food Code. This report, when signed below by the Commissioner of Health / Agent constitutes an order by the Commissioner of Health. Failure to correct violations cited in this report may result in suspension or revocation of the food establishment permit and cessation of food establishment operations. If aggrieved by this order, you have the right to a hearing. The request must be in writing and submitted to the Commissioner of Health at the above address within 10 days of receipt of this order.

Est. Type 1 - Food Svc Establis License/Permit # \_\_\_\_\_ Risk Category 02 Risk Level Observed 02 Low

Foodborne Illness Complaint Investigated (All) ☐ Involving More Than Two Persons ☐

FOODBORNE ILLNESS RISK FACTORS AND PUBLIC HEALTH INTERVENTIONS

Compliance status: IN = in compliance OUT = not in compliance N/O = not observed N/A = not applicable

Marked in appropriate box for COS and/or R. COS = corrected on-site during inspection R = repeat violation

Risk factors are improper practices or procedures identified as the most prevalent contributing factors of foodborne illness or injury. Public Health Interventions are control measures to prevent foodborne illnesses or injury.

Supervision

1. PIC Present, Knowledge and Duties

IN OUT N/O N/A COS REPEAT

⊙ ○ □ □

2. Certified Food Protection Manager

⊙ ○ ○ □ □

***This item has Notes. See Footnote 1 at end of questionnaire.***

Employee Health / Responding to Contamination Events

3A. Employee Health: PIC Knowledge, Responsibilities & Reporting

IN OUT N/O N/A COS REPEAT

⊙ ○ □ □

3B. Employee Reporting to PIC

⊙ ○ □ □

4. Proper Use of Restriction & Exclusion

⊙ ○ □ □

5. Clean-up of Vomiting and Diarrheal Events

⊙ ○ □ □

Good Hygienic Practices

6A. Proper eating, tasting, drinking, or tobacco use

IN OUT N/O N/A COS REPEAT

⊙ ○ ○ □ □

6B. Preventing contamination when tasting

⊙ ○ ○ □ □

Inspector

Acknowledged Receipt :

Page 1 of 7

## Food Establishment Inspection Report - FDA

### Good Hygienic Practices

7. No discharge from eyes, nose, and mouth

IN	OUT	N/O	N/A	COS	REPEAT
<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>

### Control of Hands as a Vehicle of Contamination

8A. Hands clean & properly washed

IN	OUT	N/O	N/A	COS	REPEAT
<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>

8B. Where to wash, hand antiseptics

IN	OUT	N/O	N/A	COS	REPEAT
<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input checked="" type="checkbox"/>

**This item has Notes. See Footnote 2 at end of questionnaire.**

**Fail Notes** | 2-301.15 | *Where to wash*  
*[Although there is a wash hand basin specifically for handwashing, there is a sign above the 3 bay sink indicating that it can be used to drink from and to wash hands. This sign must be removed and the wash hand basin should solely be used for handwashing and the 3 bay sink solely for warewashing.]*

9. No bare hand contact with RTE food or a pre-approved alternative procedure properly allowed

IN	OUT	N/O	N/A	COS	REPEAT
<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

10A. Adequate handwashing sinks properly supplied and accessible

IN	OUT	N/O	N/A	COS	REPEAT
<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>

10B. Handwashing sinks accesible with proper signage, handwashing aids

IN	OUT	N/O	N/A	COS	REPEAT
<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>

### Approved Sources

11A. Milk, eggs, juice, bottled water, hermetically sealed food, game animals

IN	OUT	N/O	N/A	COS	REPEAT
<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

11B. Packaged foods, labeling, whole muscle beef

IN	OUT	N/O	N/A	COS	REPEAT
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

11C. Obtaining raw fish, packaged meat & poultry, eggs

IN	OUT	N/O	N/A	COS	REPEAT
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

12A. Food received at proper temperature

IN	OUT	N/O	N/A	COS	REPEAT
<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

12B. Shipping and receiving frozen food

IN	OUT	N/O	N/A	COS	REPEAT
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

13. Food in good condition, honestly presented, safe, & unadulterated

IN	OUT	N/O	N/A	COS	REPEAT
<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>

13B. Food package integrity

IN	OUT	N/O	N/A	COS	REPEAT
<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>

14A. Required records available: shellstock tags, parasite destruction

IN	OUT	N/O	N/A	COS	REPEAT
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

14B. Missing shellstock tags, destruction

IN	OUT	N/O	N/A	COS	REPEAT
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

14C. Parasite destruction- storing raw/partially cooked fish

IN	OUT	N/O	N/A	COS	REPEAT
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

### Protection from Contamination

15A. Food separated & protected

IN	OUT	N/O	N/A	COS	REPEAT
<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

15B. Cleaning equip/utensils/food containers

IN	OUT	N/O	N/A	COS	REPEAT
<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

16A. Food-contact surfaces: cleaned & sanitized immersion 171° F and above

IN	OUT	N/O	N/A	COS	REPEAT
<input type="radio"/>	<input checked="" type="radio"/>		<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

**Fail Notes** | 4-501.114 (A-E, F 1&2) | *Chemical Sanitization - Temperature, pH, Concentration and Hardness*  
*[The concentration of the multi-quatenary solution was weak (less than 150ppm). The label on the solution container indicates that the concentration should be in the range of 150-400ppm. In order for sanitization to be effective, the sanitizing solution must be at the specified concentration.]*

16B. Food contact surfaces cleaned and sanitized NMT 194° F, NLT 180° F

IN	OUT	N/O	N/A	COS	REPEAT
<input checked="" type="radio"/>	<input type="radio"/>		<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

Inspector

Acknowledged Receipt :

Page 2 of 7

## Food Establishment Inspection Report - FDA

### Protection from Contamination

16C. Mechanical warewashing equipment sanitization food contact surfaces, equip., utensils

IN OUT N/O N/A COS REPEAT  
☐ ☐ ☐ ☒ ☐ ☐

17. Proper disposition of returned, previously served reconditions, & unsafe food

☒ ☐ ☐ ☐ ☐ ☐

### Time/Temperature Control for Safety Food (TCS Food)

18A. Proper cooking time & temperatures

☐ ☐ ☐ ☒ ☐ ☐

18B. Whole meat cooking and serving, storing

☐ ☐ ☐ ☒ ☐ ☐

18C. Microwave cooking of raw animal foods

☐ ☐ ☐ ☒ ☐ ☐

19. Proper reheating procedures for hot holding

☒ ☐ ☐ ☐ ☐ ☐

20. Proper cooling time & temperatures

☐ ☐ ☐ ☒ ☐ ☐

21. Proper hot holding temperatures

☐ ☒ ☐ ☐ ☐ ☐

**This item has Notes. See Footnote 3 at end of questionnaire.**

**Fail Notes** | 3-501.16 (A) | *\*Hot TCS foods Maintained at or Above 135oF, Also for whole meat roasts (130F and above)  
 [The temperature of the minced beef (tacos) in the hot holding unit was at a range of 120 -125.8 deg F. The temperature of food should be at least 135 deg F in order to prevent the growth of pathogens and therefore foodborne illness.]*

22. Proper cold holding temperatures

☒ ☐ ☐ ☐ ☐ ☐

23. Proper Date Marking

☒ ☐ ☐ ☐ ☐ ☐

23B. TCS Foods Disposition

☐ ☐ ☐ ☒ ☐ ☐

24A. Time as a public health control: procedures

☐ ☐ ☐ ☒ ☐ ☐

24B. Time as a public health control: temperatures & discarding food

☐ ☐ ☐ ☒ ☐ ☐

24C. Time as a public health control: highly susceptible population (HSP)

☐ ☐ ☐ ☒ ☐ ☐

### Consumer Advisory

25. Consumer advisory provided for raw or undercooked foods

☐ ☐ ☐ ☒ ☐ ☐

### Highly Susceptible Populations (HSP)

26A. Pasteurized foods used; prohibited foods not offered

☐ ☐ ☐ ☒ ☐ ☐

26B. Reservice of foods

☒ ☐ ☐ ☐ ☐ ☐

### Chemical

27. Food additives: approved and properly used

☒ ☐ ☐ ☐ ☐ ☐

28A. Toxic substances identified, stored and used

☒ ☐ ☐ ☐ ☐ ☐

28B. Poisonous materials, sanitizers, additives, medicines restriction, separation, storage

☒ ☐ ☐ ☐ ☐ ☐

28C. Conditions of Use: law

☒ ☐ ☐ ☐ ☐ ☐

### Conformance with Approved Procedures

29A. Compliance with variance, specialized process, & HACCP plan

☐ ☐ ☐ ☒ ☐ ☐

Inspector

Acknowledged Receipt :

Page 3 of 7

## Food Establishment Inspection Report - FDA

### Conformance with Approved Procedures

	IN	OUT	N/O	N/A	COS	REPEAT
29B. Treating juice- HACCP, reduced oxygen packaging w/out variance, conformance with approved procedures	<input type="radio"/>	<input type="radio"/>		<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
29C. When HACCP plan is required	<input type="radio"/>	<input type="radio"/>		<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

### GOOD RETAIL PRACTICES

Good Retail Practices are preventative measures to control the addition of pathogens, chemicals, and physical objects into foods.

IN = In compliance OUT = not in compliance COS - corrected on -site during inspection REPEAT = repeat violation

### Safe Food and Water

	IN	OUT	N/O	N/A	COS	REPEAT
30. Pasteurized eggs used where required	<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>
31A. Water & ice from approved source	<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>
31B. Sampling, alternative water supply	<input type="radio"/>	<input type="radio"/>		<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
31C. Sampling report	<input type="radio"/>	<input type="radio"/>		<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
32. Variance obtained for specialized processing methods	<input type="radio"/>	<input type="radio"/>		<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

### Food Temperature Control

	IN	OUT	N/O	N/A	COS	REPEAT
33A. Proper cooling methods used; adequate equipment for temperature control	<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>
33B. Frozen food	<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>
34. Plant food properly cooked for hot holding	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
35. Approved thawing methods used	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
36A. Thermometers provided and accurate	<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>
36B. Thermometers function properly	<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>

### Food Identification

	IN	OUT	COS	REPEAT
37A. Food properly labeled; original container	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
37B. Food labels, labeling of ingredients	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

### Prevention of Food Contamination

	IN	OUT	COS	REPEAT
38A. Insects, rodents, & animals not present	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
38B. Handling prohibition, controlling pests, prohibiting animals	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
39A. Contamination prevented during food storage	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
39B. Food display; ice used as an exterior coolant prohibited as an ingredient	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
39C. Consumer self-service operations- utensils and monitoring	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
40A. Personal cleanliness- prohibition jewelry	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
40B. Maintenance of fingernails	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
41. Wiping cloths; properly used and stored	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
42A. Washing Produce - following chemical manufacturers label	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
42B. Washing produce	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

Inspector \_\_\_\_\_

Acknowledged Receipt : \_\_\_\_\_

Page 4 of 7

## Food Establishment Inspection Report - FDA

Prevention of Food Contamination		IN	OUT	COS	REPEAT	
42C. Washing produce- chemicals		<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Proper Use of Utensils		IN	OUT	COS	REPEAT	
43. In-use utensils; properly stored		<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>	
44. Utensils, equipment & linens; properly stored, dried, and handled		<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>	
45A. Single-use/ single service articles properly stored and used, required		<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>	
45B. Single-use/service articles use limitation, kitchenware and tableware preventing contamination		<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>	
46. Gloves used properly		<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Utensils, Equipment and Vending		IN	OUT	COS	REPEAT	
47A. Food & non-food contact surfaces cleanable		<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>	
47B. Food contact surfaces /utensils cleanability, molluscan shellfish tanks, consumer self-service		<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>	
47C. Properly designed characteristics: food and non-food contact surfaces, molluscan shellfish tanks		<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>	
48A. Warewashing facilities: installed, maintained, & used; test strips		<input type="radio"/>	<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Fail Notes	<div style="border-left: 1px solid black; padding-left: 10px;"> <p>4-501.19 Manual warewashing equipment, wash solution temperature                      [The temperature of the wash solution was 87.3 deg F. The wash solution temperature must be at least 110 deg F so that the performance of the detergent is not adversely affected, for example, animal fats that may be present on the dirty dishes would not be dissolved if the temperature of the wash solution is below 110 deg F.]</p> </div>					
48B. Operational warewashing machines		<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>	
49. Non-food contact surfaces clean		<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Physical Facilities		IN	OUT	N/A	COS	REPEAT
50. Hot & cold water available; adequate pressure		<input checked="" type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>
51A. Plumbing installed; proper backflow devices		<input checked="" type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>
51B. Prohibiting a cross-connection, inspection and servicing system		<input checked="" type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>
51C. Approved system and cleanable fixtures, service sink		<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
52A. Sewage and waste water properly disposed		<input checked="" type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>
52B. Grease traps easily accessible for cleaning		<input type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>
52C. Removing mobile food establishment waste		<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
53A. Toilet facilities; properly constructed, supplied, & cleaned		<input checked="" type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>
53B. Toilet tissue availability		<input checked="" type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>
54. Garbage & refuse properly disposed; facilities maintained		<input checked="" type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>
55A. Physical facilities installed, maintained, & clean		<input checked="" type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>
55B. Private homes and living or sleeping quarters, use prohibition		<input checked="" type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>
56. Adequate ventilation & lighting; designated areas used		<input checked="" type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>

Inspector \_\_\_\_\_

Acknowledged Receipt : \_\_\_\_\_

Page 5 of 7

## Food Establishment Inspection Report - FDA

### MASSACHUSETTS ONLY REGULATIONS

Rules and Regulations adopted for use in Massachusetts only.

#### Facilities

	IN	OUT	COS	REPEAT
57A. Catering	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
57B. When plans are reviewed, prerequisite for operations- valid permit	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
57C. Contents of plans and specifications, preoperational inspections	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
58. Mobile Food Operations	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
59. Temporary Food Establishments	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
60. Residential Kitchens	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

#### Procedures

	IN	OUT	COS	REPEAT
61. Anti-choking Procedures	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
62. Tobacco Products: Notice and Sale	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
63. Food Allergy Awareness Requirements	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

Inspector \_\_\_\_\_

Acknowledged Receipt : \_\_\_\_\_

Page 6 of 7

## Food Establishment Inspection Report - FDA

### **Footnote 1**

#### **Notes:**

The PIC, Matilda Doko informed me that she attended food hygiene training course (serve safe) in August 2017 but does not have the certificate in the office. The PIC also informed me that she (and other catering staff) undergoes training every 3 weeks with Sodexo.

### **Footnote 2**

#### **Notes:**

The PIC mentioned that she will remove the sign when she has finished serving lunch.

### **Footnote 3**

#### **Notes:**

The thermometer in the hot holding unit indicated a temperature of the hot holding unit as 135 deg F.



**City of Newton**  
**Health and Human Services**  
 Deborah Youngblood, PhD, Commissioner  
 1000 Commonwealth Ave Newton, MA 02459  
 (617) 796-1420



**Public Health**  
 Prevent. Promote. Protect.

**Food Establishment Inspection Report - FDA**

**Insp Date:** 10/25/2018    **Business ID:** 1N2365  
**Business:** Underwood School  
 101 Vernon St.  
  
 Newton, MA 02458

**Inspection:** 6N000057  
**Section:** 1  
**Phone:** 559-9660  
**Inspector:** 1N11123 Nicola Assan  
**Reason:** 1-Routine  
**Results:** No Follow-up R2

**Inspection Summary**

Official Order for Correction: Based on an inspection today, the items checked indicate violations of 105 CMR 590.000/ 2013 Federal Food Code. This report, when signed below by the Commissioner of Health / Agent constitutes an order by the Commissioner of Health. Failure to correct violations cited in this report may result in suspension or revocation of the food establishment permit and cessation of food establishment operations. If aggrieved by this order, you have the right to a hearing. The request must be in writing and submitted to the Commissioner of Health at the above address within 10 days of receipt of this order.

Est. Type 1 - Food Svc Establis License/Permit # \_\_\_\_\_ Risk Category 02 Risk Level Observed 02 Low

Foodborne Illness Complaint Investigated (All) ☐ Involving More Than Two Persons ☐

**FOODBORNE ILLNESS RISK FACTORS AND PUBLIC HEALTH INTERVENTIONS**

Compliance status: IN = in compliance OUT = not in compliance N/O = not observed N/A = not applicable

Marked in appropriate box for COS and/or R. COS = corrected on-site during inspection R = repeat violation

Risk factors are improper practices or procedures identified as the most prevalent contributing factors of foodborne illness or injury. Public Health Interventions are control measures to prevent foodborne illnesses or injury.

**Supervision**

1. PIC Present, Knowledge and Duties
2. Certified Food Protection Manager

IN	OUT	N/O	N/A	COS	REPEAT
<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>
<input checked="" type="radio"/>	<input type="radio"/>		<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

***This item has Notes. See Footnote 1 at end of questionnaire.***

**Employee Health / Responding to Contamination Events**

- 3A. Employee Health: PIC Knowledge, Responsibilities & Reporting
- 3B. Employee Reporting to PIC
4. Proper Use of Restriction & Exclusion
5. Clean-up of Vomiting and Diarrheal Events

IN	OUT	N/O	N/A	COS	REPEAT
<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>
<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>
<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>
<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>

**Good Hygienic Practices**

- 6A. Proper eating, tasting, drinking, or tobacco use
- 6B. Preventing contamination when tasting

IN	OUT	N/O	N/A	COS	REPEAT
<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>
<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>

*Assan*

Inspector

Acknowledged Receipt : Tim Viveiros

Page 1 of 7

## Food Establishment Inspection Report - FDA

Good Hygienic Practices		IN	OUT	N/O	N/A	COS	REPEAT
7. No discharge from eyes, nose, and mouth		⊙	○	○		□	□
Control of Hands as a Vehicle of Contamination		IN	OUT	N/O	N/A	COS	REPEAT
8A. Hands clean & properly washed		⊙	○	○		□	□
8B. Where to wash, hand antiseptics		⊙	○	○		□	□
9. No bare hand contact with RTE food or a pre-approved alternative procedure properly allowed		⊙	○	○	○	□	□
10A. Adequate handwashing sinks properly supplied and accessible		⊙	○			□	□
10B. Handwashing sinks accesible with proper signage, handwashing aids		⊙	○			□	□
Approved Sources		IN	OUT	N/O	N/A	COS	REPEAT
11A. Milk, eggs, juice, bottled water, hermetically sealed food, game animals		⊙	○	○	○	□	□
11B. Packaged foods, labeling, whole muscle beef		⊙	○	○	○	□	□
11C. Obtaining raw fish, packaged meat & poultry, eggs		○	○	○	⊙	□	□
12A. Food received at proper temperature		○	○	⊙	○	□	□
12B. Shipping and receiving frozen food		○	○	○	⊙	□	□
13. Food in good condition, honestly presented, safe, & unadulterated		⊙	○			□	□
13B. Food package integrity		⊙	○			□	□
14A. Required records available: shellstock tags, parasite destruction		○	○	○	⊙	□	□
14B. Missing shellstock tags, destruction		○	○	○	⊙	□	□
14C. Parasite destruction- storing raw/partially cooked fish		○	○	○	⊙	□	□
Protection from Contamination		IN	OUT	N/O	N/A	COS	REPEAT
15A. Food separated & protected		⊙	○	○	○	□	□
15B. Cleaning equip/utensils/food containers		⊙	○	○	○	□	□
16A. Food-contact surfaces: cleaned & sanitized immersion 171° F and above		○	⊙		○	□	□
Fail Notes	<div style="border: 1px solid black; padding: 5px;"> <p>4-501.114 (A-E, F 1&amp;2)    <i>Chemical Sanitization - Temperature, pH, Concentration and Hardness</i>  <i>[The concentration of the sanitizing solution in the 3 bay compartment sink was weak (&lt;150ppm). In addition, there appeared to be no sanitizing solution in the red buckets as the test strip measured 0ppm. A chemical sanitizer used in a sanitizing solution for a manual or mechanical operation shall be used in accordance with the manufacturer's instructions.]</i></p> </div>						
16B. Food contact surfaces cleaned and sanitized NMT 194° F, NLT 180° F		⊙	○		○	□	□
16C. Mechanical warewashing equipment sanitization food contact surfaces, equip., utensils		○	○		○	□	□
17. Proper disposition of returned, previously served reconditions, & unsafe food		⊙	○			□	□
Time/Temperature Control for Safety Food (TCS Food)		IN	OUT	N/O	N/A	COS	REPEAT

*AS201*

Inspector

Acknowledged Receipt : Tim Viveiros

Page 2 of 7

## Food Establishment Inspection Report - FDA

Time/Temperature Control for Safety Food (TCS Food)	IN	OUT	N/O	N/A	COS	REPEAT
18A. Proper cooking time & temperatures	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
18B. Whole meat cooking and serving, storing	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
18C. Microwave cooking of raw animal foods	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
19. Proper reheating procedures for hot holding	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
20. Proper cooling time & temperatures	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
21. Proper hot holding temperatures	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
22. Proper cold holding temperatures	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
23. Proper Date Marking	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
23B. TCS Foods Disposition	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
24A. Time as a public health control: procedures	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
24B. Time as a public health control: temperatures & discarding food	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
24C. Time as a public health control: highly susceptible population (HSP)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
<b>Consumer Advisory</b>	IN	OUT	N/O	N/A	COS	REPEAT
25. Consumer advisory provided for raw or undercooked foods	<input type="radio"/>	<input type="radio"/>		<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
<b>Highly Susceptible Populations (HSP)</b>	IN	OUT	N/O	N/A	COS	REPEAT
26A. Pasteurized foods used; prohibited foods not offered	<input type="radio"/>	<input type="radio"/>		<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
26B. Reservice of foods	<input type="radio"/>	<input type="radio"/>		<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
<b>Chemical</b>	IN	OUT	N/O	N/A	COS	REPEAT
27. Food additives: approved and properly used	<input type="radio"/>	<input type="radio"/>		<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
28A. Toxic substances identified, stored and used	<input checked="" type="radio"/>	<input type="radio"/>		<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
28B. Poisonous materials, sanitizers, additives, medicines restriction, separation, storage	<input checked="" type="radio"/>	<input type="radio"/>		<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
28C. Conditions of Use: law	<input checked="" type="radio"/>	<input type="radio"/>		<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
<b>Conformance with Approved Procedures</b>	IN	OUT	N/O	N/A	COS	REPEAT
29A. Compliance with variance, specialized process, & HACCP plan	<input type="radio"/>	<input type="radio"/>		<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
29B. Treating juice- HACCP, reduced oxygen packaging w/out variance, conformance with approved procedures	<input type="radio"/>	<input type="radio"/>		<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
29C. When HACCP plan is required	<input type="radio"/>	<input type="radio"/>		<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

### GOOD RETAIL PRACTICES

Good Retail Practices are preventative measures to control the addition of pathogens, chemicals, and physical objects into foods.

IN = In compliance    OUT = not in compliance    COS - corrected on -site during inspection    REPEAT = repeat violation

Safe Food and Water	IN	OUT	N/O	N/A	COS	REPEAT
30. Pasteurized eggs used where required	<input type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>



Inspector

Acknowledged Receipt : Tim Viveiros

Page 3 of 7

## Food Establishment Inspection Report - FDA

Safe Food and Water	IN	OUT	N/O	N/A	COS	REPEAT
31A. Water & ice from approved source	<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>
31B. Sampling, alternative water supply	<input type="radio"/>	<input type="radio"/>		<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
31C. Sampling report	<input type="radio"/>	<input type="radio"/>		<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
32. Variance obtained for specialized processing methods	<input type="radio"/>	<input type="radio"/>		<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
Food Temperature Control	IN	OUT	N/O	N/A	COS	REPEAT
33A. Proper cooling methods used; adequate equipment for temperature control	<input type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>
33B. Frozen food	<input type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>
34. Plant food properly cooked for hot holding	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
35. Approved thawing methods used	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
36A. Thermometers provided and accurate	<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>
36B. Thermometers function properly	<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>
Food Identification	IN	OUT	COS	REPEAT		
37A. Food properly labeled; original container	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>		
37B. Food labels, labeling of ingredients	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>		
Prevention of Food Contamination	IN	OUT	COS	REPEAT		
38A. Insects, rodents, & animals not present	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>		
38B. Handling prohibition, controlling pests, prohibiting animals	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>		
39A. Contamination prevented during food storage	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>		
39B. Food display; ice used as an exterior coolant prohibited as an ingredient	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>		
39C. Consumer self-service operations- utensils and monitoring	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>		
40A. Personal cleanliness- prohibition jewelry	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>		
40B. Maintenance of fingernails	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>		
41. Wiping cloths; properly used and stored	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>		
42A. Washing Produce - following chemical manufacturers label	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>		
42B. Washing produce	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>		
42C. Washing produce- chemicals	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>		
Proper Use of Utensils	IN	OUT	COS	REPEAT		
43. In-use utensils; properly stored	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>		
44. Utensils, equipment & linens; properly stored, dried, and handled	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>		
45A. Single-use/ single service articles properly stored and used, required	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>		
45B. Single-use/service articles use limitation, kitchenware and tableware preventing contamination	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>		
46. Gloves used properly	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>		



Inspector

Acknowledged Receipt : Tim Viveiros

Page 4 of 7

## Food Establishment Inspection Report - FDA

### Utensils, Equipment and Vending

	IN	OUT	COS	REPEAT
47A. Food & non-food contact surfaces cleanable	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
47B. Food contact surfaces /utensils cleanability, molluscan shellfish tanks, consumer self-service	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
47C. Properly designed characteristics: food and non-food contact surfaces, molluscan shellfish tanks	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
48A. Warewashing facilities: installed, maintained, & used; test strips	<input type="radio"/>	<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
<i>Fail Notes</i> 4-501.19 <i>Manual warewashing equipment, wash solution temperature [The temperature of the wash solution in the 3 bay compartment sink was 105.8 degrees F. The wash solution temperature required in the Food Code is essential for removing organic matter. If the temperature is below 110 degrees F, the performance of the detergent may be adversely affected, for example, animal fats that may be present on dirty dishes would not be dissolved.]</i>				
48B. Operational warewashing machines	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
49. Non-food contact surfaces clean	<input type="radio"/>	<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

*Fail Notes*    4-602.13    *Nonfood Contact Surfaces [The gaskets of the refrigerator were dirty. Non-food contact surfaces shall be cleaned at a frequency necessary to prevent the accumulation of dirt.]*

### Physical Facilities

	IN	OUT	N/A	COS	REPEAT
50. Hot & cold water available; adequate pressure	<input checked="" type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>
51A. Plumbing installed; proper backflow devices	<input type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>
51B. Prohibiting a cross-connection, inspection and servicing system	<input type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>
51C. Approved system and cleanable fixtures, service sink	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
52A. Sewage and waste water properly disposed	<input checked="" type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>
52B. Grease traps easily accessible for cleaning	<input type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>
52C. Removing mobile food establishment waste	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
53A. Toilet facilities; properly constructed, supplied, & cleaned	<input checked="" type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>
53B. Toilet tissue availability	<input checked="" type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>
54. Garbage & refuse properly disposed; facilities maintained	<input checked="" type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>
55A. Physical facilities installed, maintained, & clean	<input checked="" type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>
55B. Private homes and living or sleeping quarters, use prohibition	<input checked="" type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>
56. Adequate ventilation & lighting; designated areas used	<input checked="" type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>

### MASSACHUSETTS ONLY REGULATIONS

Rules and Regulations adopted for use in Massachusetts only.

### Facilities

	IN	OUT	COS	REPEAT
57A. Catering	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
57B. When plans are reviewed, prerequisite for operations- valid permit	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>



Inspector

Acknowledged Receipt : Tim Viveiros

Page 5 of 7

## Food Establishment Inspection Report - FDA

### Facilities

- 57C. Contents of plans and specifications, preoperational inspections
- 58. Mobile Food Operations
- 59. Temporary Food Establishments
- 60. Residential Kitchens

IN OUT COS REPEAT

- ☐ ☐ ☐ ☐
- ☐ ☐ ☐ ☐
- ☐ ☐ ☐ ☐
- ☐ ☐ ☐ ☐

### Procedures

- 61. Anti-choking Procedures
- 62. Tobacco Products: Notice and Sale
- 63. Food Allergy Awareness Requirements

IN OUT COS REPEAT

- ☐ ☐ ☐ ☐
- ☐ ☐ ☐ ☐
- ☐ ☐ ☐ ☐



Inspector

Acknowledged Receipt : Tim Viveiros

Page 6 of 7

## Food Establishment Inspection Report - FDA

### Footnote 1

#### **Notes:**

PIC to attend serv safe certification class on 12th November 2018.



Inspector

Acknowledged Receipt : Tim Viveiros

Page 7 of 7



City of Newton  
Health and Human Services  
Deborah Youngblood, PhD, Commissioner  
1000 Commonwealth Ave Newton, MA 02459  
(617) 796-1420



Public Health  
Prevent. Promote. Protect.

Food Establishment Inspection Report - FDA

Insp Date: 5/6/2019 Business ID: 1N2365

Business: Underwood School  
101 Vernon St.

Newton, MA 02458

Inspection: 6N000116

Section: 1

Phone: 559-9660

Inspector: 1N11123 Nicola Assan

Reason: 1-Routine

Results: No Follow-up R2

Inspection Summary

Official Order for Correction: Based on an inspection today, the items checked indicate violations of 105 CMR 590.000/ 2013 Federal Food Code. This report, when signed below by the Commissioner of Health / Agent constitutes an order by the Commissioner of Health. Failure to correct violations cited in this report may result in suspension or revocation of the food establishment permit and cessation of food establishment operations. If aggrieved by this order, you have the right to a hearing. The request must be in writing and submitted to the Commissioner of Health at the above address within 10 days of receipt of this order.

Est. Type 1 - Food Svc Establis License/Permit # \_\_\_\_\_ Risk Category 02 Risk Level Observed 02 Low

Foodborne Illness Complaint Investigated (All) ☐ Involving More Than Two Persons ☐

FOODBORNE ILLNESS RISK FACTORS AND PUBLIC HEALTH INTERVENTIONS

Compliance status: IN = in compliance OUT = not in compliance N/O = not observed N/A = not applicable

Marked in appropriate box for COS and/or R. COS = corrected on-site during inspection R = repeat violation

Risk factors are improper practices or procedures identified as the most prevalent contributing factors of foodborne illness or injury. Public Health Interventions are control measures to prevent foodborne illnesses or injury.

Supervision

1. PIC Present, Knowledge and Duties

IN	OUT	N/O	N/A	COS	REPEAT
<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>

2. Certified Food Protection Manager

<input checked="" type="radio"/>	<input type="radio"/>		<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
----------------------------------	-----------------------	--	-----------------------	--------------------------	--------------------------

Employee Health / Responding to Contamination Events

3A. Employee Health: PIC Knowledge, Responsibilities & Reporting

<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>
----------------------------------	-----------------------	--	--	--------------------------	--------------------------

3B. Employee Reporting to PIC

<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>
----------------------------------	-----------------------	--	--	--------------------------	--------------------------

4. Proper Use of Restriction & Exclusion

<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>
----------------------------------	-----------------------	--	--	--------------------------	--------------------------

5. Clean-up of Vomiting and Diarrheal Events

<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>
----------------------------------	-----------------------	--	--	--------------------------	--------------------------

Good Hygienic Practices

6A. Proper eating, tasting, drinking, or tobacco use

IN	OUT	N/O	N/A	COS	REPEAT
<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>

6B. Preventing contamination when tasting

<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>
----------------------------------	-----------------------	-----------------------	--	--------------------------	--------------------------

*Assan*

Inspector

Acknowledged Receipt : Tim Viveiros

Page 1 of 6

## Food Establishment Inspection Report - FDA

### Good Hygienic Practices

7. No discharge from eyes, nose, and mouth

IN	OUT	N/O	N/A	COS	REPEAT
<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>

### Control of Hands as a Vehicle of Contamination

8A. Hands clean & properly washed

IN	OUT	N/O	N/A	COS	REPEAT
<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>

8B. Where to wash, hand antiseptics

IN	OUT	N/O	N/A	COS	REPEAT
<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>

9. No bare hand contact with RTE food or a pre-approved alternative procedure properly allowed

IN	OUT	N/O	N/A	COS	REPEAT
<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

10A. Adequate handwashing sinks properly supplied and accessible

IN	OUT	N/O	N/A	COS	REPEAT
<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>

10B. Handwashing sinks accesible with proper signage, handwashing aids

IN	OUT	N/O	N/A	COS	REPEAT
<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>

### Approved Sources

11A. Milk, eggs, juice, bottled water, hermetically sealed food, game animals

IN	OUT	N/O	N/A	COS	REPEAT
<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

11B. Packaged foods, labeling, whole muscle beef

IN	OUT	N/O	N/A	COS	REPEAT
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

11C. Obtaining raw fish, packaged meat & poultry, eggs

IN	OUT	N/O	N/A	COS	REPEAT
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

12A. Food received at proper temperature

IN	OUT	N/O	N/A	COS	REPEAT
<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

12B. Shipping and receiving frozen food

IN	OUT	N/O	N/A	COS	REPEAT
<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

13. Food in good condition, honestly presented, safe, & unadulterated

IN	OUT	N/O	N/A	COS	REPEAT
<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>

13B. Food package integrity

IN	OUT	N/O	N/A	COS	REPEAT
<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>

14A. Required records available: shellstock tags, parasite destruction

IN	OUT	N/O	N/A	COS	REPEAT
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

14B. Missing shellstock tags, destruction

IN	OUT	N/O	N/A	COS	REPEAT
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

14C. Parasite destruction- storing raw/partially cooked fish

IN	OUT	N/O	N/A	COS	REPEAT
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

### Protection from Contamination

15A. Food separated & protected

IN	OUT	N/O	N/A	COS	REPEAT
<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

15B. Cleaning equip/utensils/food containers

IN	OUT	N/O	N/A	COS	REPEAT
<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

16A. Food-contact surfaces: cleaned & sanitized immersion 171° F and above

IN	OUT	N/O	N/A	COS	REPEAT
<input type="radio"/>	<input checked="" type="radio"/>		<input type="radio"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>

Fail Notes 4-501.114 (A-E, F 1&2)

*Chemical Sanitization - Temperature, pH, Concentration and Hardness  
[The temperature of the sanitizing solution in the 3 bay sink and red buckets was weak (less than 150ppm). A quaternary ammonium solution shall have a concentration specified by the manufacturer's directions (read the label). The PIC corrected the concentration of the solution.]*

16B. Food contact surfaces cleaned and sanitized NMT 194° F, NLT 180° F

IN	OUT	N/O	N/A	COS	REPEAT
<input checked="" type="radio"/>	<input type="radio"/>		<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

16C. Mechanical warewashing equipment sanitization food contact surfaces, equip., utensils

IN	OUT	N/O	N/A	COS	REPEAT
<input checked="" type="radio"/>	<input type="radio"/>		<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

17. Proper disposition of returned, previously served reconditions, & unsafe food

IN	OUT	N/O	N/A	COS	REPEAT
<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>

### Time/Temperature Control for Safety Food (TCS Food)

18A. Proper cooking time & temperatures

IN	OUT	N/O	N/A	COS	REPEAT
<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

*Assm*

Inspector

Acknowledged Receipt : Tim Viveiros

Page 2 of 6

## Food Establishment Inspection Report - FDA

Time/Temperature Control for Safety Food (TCS Food)			IN	OUT	N/O	N/A	COS	REPEAT
18B. Whole meat cooking and serving, storing			<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
18C. Microwave cooking of raw animal foods			<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
19. Proper reheating procedures for hot holding			<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
20. Proper cooling time & temperatures			<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
21. Proper hot holding temperatures			<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
22. Proper cold holding temperatures			<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
<div style="display: flex; justify-content: space-between;"> <div style="width: 20%;">Fail Notes</div> <div style="width: 80%;">                     3-501.16(A2 &amp;B)    <i>*Cold PHFs Maintained at or Below 41oF- also pertains to untreated eggs (45F)                      [The temperature of the TCS food in the refrigerator was observed to be 42.4 degrees F. In addition, the temperature on the refrigerator thermometer was reading a similar temperature (42 degrees F).                      Maintain the internal temperature of TCS foods at 41 degrees F or below.]</i> </div> </div>								
23. Proper Date Marking			<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
23B. TCS Foods Disposition			<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
24A. Time as a public health control: procedures			<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
24B. Time as a public health control: temperatures & discarding food			<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
24C. Time as a public health control: highly susceptible population (HSP)			<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
Consumer Advisory			IN	OUT	N/O	N/A	COS	REPEAT
25. Consumer advisory provided for raw or undercooked foods			<input type="radio"/>	<input type="radio"/>		<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
Highly Susceptible Populations (HSP)			IN	OUT	N/O	N/A	COS	REPEAT
26A. Pasteurized foods used; prohibited foods not offered			<input type="radio"/>	<input type="radio"/>		<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
26B. Reservice of foods			<input type="radio"/>	<input type="radio"/>		<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
Chemical			IN	OUT	N/O	N/A	COS	REPEAT
27. Food additives: approved and properly used			<input type="radio"/>	<input type="radio"/>		<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
28A. Toxic substances identified, stored and used			<input checked="" type="radio"/>	<input type="radio"/>		<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
28B. Poisonous materials, sanitizers, additives, medicines restriction, separation, storage			<input checked="" type="radio"/>	<input type="radio"/>		<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
28C. Conditions of Use: law			<input checked="" type="radio"/>	<input type="radio"/>		<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
Conformance with Approved Procedures			IN	OUT	N/O	N/A	COS	REPEAT
29A. Compliance with variance, specialized process, & HACCP plan			<input type="radio"/>	<input type="radio"/>		<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
29B. Treating juice- HACCP, reduced oxygen packaging w/out variance, conformance with approved procedures			<input type="radio"/>	<input type="radio"/>		<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
29C. When HACCP plan is required			<input type="radio"/>	<input type="radio"/>		<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

*Assm*

Inspector

Acknowledged Receipt : Tim Viveiros

Page 3 of 6

## Food Establishment Inspection Report - FDA

### GOOD RETAIL PRACTICES

Good Retail Practices are preventative measures to control the addition of pathogens, chemicals, and physical objects into foods.

IN = In compliance OUT = not in compliance COS - corrected on -site during inspection REPEAT = repeat violation

#### Safe Food and Water

	IN	OUT	N/O	N/A	COS	REPEAT
30. Pasteurized eggs used where required	<input type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>
31A. Water & ice from approved source	<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>
31B. Sampling, alternative water supply	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>
31C. Sampling report	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>
32. Variance obtained for specialized processing methods	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>

#### Food Temperature Control

	IN	OUT	N/O	N/A	COS	REPEAT
33A. Proper cooling methods used; adequate equipment for temperature control	<input type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>
33B. Frozen food	<input type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>
34. Plant food properly cooked for hot holding	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
35. Approved thawing methods used	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
36A. Thermometers provided and accurate	<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>
36B. Thermometers function properly	<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>

#### Food Identification

	IN	OUT	COS	REPEAT
37A. Food properly labeled; original container	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
37B. Food labels, labeling of ingredients	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

#### Prevention of Food Contamination

	IN	OUT	COS	REPEAT
38A. Insects, rodents, & animals not present	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
38B. Handling prohibition, controlling pests, prohibiting animals	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
39A. Contamination prevented during food storage	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
39B. Food display; ice used as an exterior coolant prohibited as an ingredient	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
39C. Consumer self-service operations- utensils and monitoring	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
40A. Personal cleanliness- prohibition jewelry	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
40B. Maintenance of fingernails	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
41. Wiping cloths; properly used and stored	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
42A. Washing Produce - following chemical manufacturers label	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
42B. Washing produce	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
42C. Washing produce- chemicals	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

#### Proper Use of Utensils

	IN	OUT	COS	REPEAT
43. In-use utensils; properly stored	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

*Handwritten signature*

Inspector

Acknowledged Receipt : Tim Viveiros

Page 4 of 6

## Food Establishment Inspection Report - FDA

### Proper Use of Utensils

	IN	OUT	COS	REPEAT
44. Utensils, equipment & linens; properly stored, dried, and handled	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
45A. Single-use/ single service articles properly stored and used, required	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
45B. Single-use/service articles use limitation, kitchenware and tableware preventing contamination	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
46. Gloves used properly	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

### Utensils, Equipment and Vending

	IN	OUT	COS	REPEAT
47A. Food & non-food contact surfaces cleanable	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
47B. Food contact surfaces /utensils cleanability, molluscan shellfish tanks, consumer self-service	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
47C. Properly designed characteristics: food and non-food contact surfaces, molluscan shellfish tanks	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
48A. Warewashing facilities: installed, maintained, & used; test strips	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
48B. Operational warewashing machines	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
49. Non-food contact surfaces clean	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

### Physical Facilities

	IN	OUT	N/A	COS	REPEAT
50. Hot & cold water available; adequate pressure	<input checked="" type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>
51A. Plumbing installed; proper backflow devices	<input checked="" type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>
51B. Prohibiting a cross-connection, inspection and servicing system	<input checked="" type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>
51C. Approved system and cleanable fixtures, service sink	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
52A. Sewage and waste water properly disposed	<input checked="" type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>
52B. Grease traps easily accessible for cleaning	<input checked="" type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>
52C. Removing mobile food establishment waste	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
53A. Toilet facilities; properly constructed, supplied, & cleaned	<input checked="" type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>
53B. Toilet tissue availability	<input checked="" type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>
54. Garbage & refuse properly disposed; facilities maintained	<input checked="" type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>
55A. Physical facilities installed, maintained, & clean	<input checked="" type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>
55B. Private homes and living or sleeping quarters, use prohibition	<input checked="" type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>
56. Adequate ventilation & lighting; designated areas used	<input checked="" type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>

### MASSACHUSETTS ONLY REGULATIONS

Rules and Regulations adopted for use in Massachusetts only.

### Facilities

	IN	OUT	COS	REPEAT
57A. Catering	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
57B. When plans are reviewed, prerequisite for operations- valid permit	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
57C. Contents of plans and specifications, preoperational inspections	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

*Asson*

Inspector

Acknowledged Receipt : Tim Viveiros

Page 5 of 6

## Food Establishment Inspection Report - FDA

### Facilities

58. Mobile Food Operations

IN OUT COS REPEAT

☐ ☐ ☐ ☐

59. Temporary Food Establishments

☐ ☐ ☐ ☐

60. Residential Kitchens

☐ ☐ ☐ ☐

### Procedures

61. Anti-choking Procedures

IN OUT COS REPEAT

☐ ☐ ☐ ☐

62. Tobacco Products: Notice and Sale

☐ ☐ ☐ ☐

63. Food Allergy Awareness Requirements

☐ ☐ ☐ ☐



Inspector

Acknowledged Receipt : Tim Viveiros

Page 6 of 6



City of Newton  
Health and Human Services  
Deborah Youngblood, PhD, Commissioner  
1000 Commonwealth Ave Newton, MA 02459  
(617) 796-1420



Public Health  
Prevent. Promote. Protect.

Food Establishment Inspection Report - FDA

Insp Date: 11/6/2017  
Business: Ward School  
10 Dolphin Rd.

Business ID: 1N2380

Newton, MA 02459

Inspection: 6N000001

Section: 1

Phone: 617-559-6450

Inspector: 1N11123 Nicola Assan

Reason: 1-Routine

Results: No Follow-up R2

Inspection Summary

Official Order for Correction: Based on an inspection today, the items checked indicate violations of 105 CMR 590.000/ 2013 Federal Food Code. This report, when signed below by the Commissioner of Health / Agent constitutes an order by the Commissioner of Health. Failure to correct violations cited in this report may result in suspension or revocation of the food establishment permit and cessation of food establishment operations. If aggrieved by this order, you have the right to a hearing. The request must be in writing and submitted to the Commissioner of Health at the above address within 10 days of receipt of this order.

Est. Type 1 - Food Svc Establis License/Permit # \_\_\_\_\_ Risk Category 02 Risk Level Observed 02 Low

Foodborne Illness Complaint Investigated (All) ☐ Involving More Than Two Persons ☐

FOODBORNE ILLNESS RISK FACTORS AND PUBLIC HEALTH INTERVENTIONS

Compliance status: IN = in compliance OUT = not in compliance N/O = not observed N/A = not applicable

Marked in appropriate box for COS and/or R. COS = corrected on-site during inspection R = repeat violation

Risk factors are improper practices or procedures identified as the most prevalent contributing factors of foodborne illness or injury. Public Health Interventions are control measures to prevent foodborne illnesses or injury.

Supervision

1. PIC Present, Knowledge and Duties

IN	OUT	N/O	N/A	COS	REPEAT
<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>

2. Certified Food Protection Manager

<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>
----------------------------------	-----------------------	-----------------------	--	--------------------------	--------------------------

Employee Health / Responding to Contamination Events

3A. Employee Health: PIC Knowledge, Responsibilities & Reporting

<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>
----------------------------------	-----------------------	--	--	--------------------------	--------------------------

3B. Employee Reporting to PIC

<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>
----------------------------------	-----------------------	--	--	--------------------------	--------------------------

4. Proper Use of Restriction & Exclusion

<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>
----------------------------------	-----------------------	--	--	--------------------------	--------------------------

5. Clean-up of Vomiting and Diarrheal Events

<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>
----------------------------------	-----------------------	--	--	--------------------------	--------------------------

Good Hygienic Practices

6A. Proper eating, tasting, drinking, or tobacco use

<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>
----------------------------------	-----------------------	-----------------------	--	--------------------------	--------------------------

6B. Preventing contamination when tasting

<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>
----------------------------------	-----------------------	-----------------------	--	--------------------------	--------------------------

Inspector

Acknowledged Receipt :

Page 1 of 7

## Food Establishment Inspection Report - FDA

Good Hygienic Practices		IN	OUT	N/O	N/A	COS	REPEAT
7. No discharge from eyes, nose, and mouth		<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>

Control of Hands as a Vehicle of Contamination		IN	OUT	N/O	N/A	COS	REPEAT
8A. Hands clean & properly washed		<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>
8B. Where to wash, hand antiseptics		<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>
9. No bare hand contact with RTE food or a pre-approved alternative procedure properly allowed		<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
10A. Adequate handwashing sinks properly supplied and accessible		<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>
10B. Handwashing sinks accesible with proper signage, handwashing aids		<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>

Approved Sources		IN	OUT	N/O	N/A	COS	REPEAT
11A. Milk, eggs, juice, bottled water, hermetically sealed food, game animals		<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
11B. Packaged foods, labeling, whole muscle beef		<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
11C. Obtaining raw fish, packaged meat & poultry, eggs		<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
12A. Food received at proper temperature		<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
12B. Shipping and receiving frozen food		<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
13. Food in good condition, honestly presented, safe, & unadulterated		<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>
13B. Food package integrity		<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>
14A. Required records available: shellstock tags, parasite destruction		<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
14B. Missing shellstock tags, destruction		<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
14C. Parasite destruction- storing raw/partially cooked fish		<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

Protection from Contamination		IN	OUT	N/O	N/A	COS	REPEAT
15A. Food separated & protected		<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
15B. Cleaning equip/utensils/food containers		<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
16A. Food-contact surfaces: cleaned & sanitized immersion 171° F and above		<input type="radio"/>	<input checked="" type="radio"/>		<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
Fail Notes	<div style="border: 1px solid black; padding: 5px;"> 4-501.114 (A-E, F 1&amp;2)    <i>Chemical Sanitization - Temperature, pH, Concentration and Hardness</i>  <i>[The quat sanitizer solution was weak (below 100ppm). Maintain the concentration within the manufacturers range between 200-400ppm.]</i> </div>						
16B. Food contact surfaces cleaned and sanitized NMT 194° F, NLT 180° F		<input checked="" type="radio"/>	<input type="radio"/>		<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
16C. Mechanical warewashing equipment sanitization food contact surfaces, equip., utensils		<input checked="" type="radio"/>	<input type="radio"/>		<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
17. Proper disposition of returned, previously served reconditions, & unsafe food		<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>

Time/Temperature Control for Safety Food (TCS Food)		IN	OUT	N/O	N/A	COS	REPEAT
18A. Proper cooking time & temperatures		<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
18B. Whole meat cooking and serving, storing		<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
18C. Microwave cooking of raw animal foods		<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

Inspector \_\_\_\_\_

Acknowledged Receipt : \_\_\_\_\_

Page 2 of 7

## Food Establishment Inspection Report - FDA

### Time/Temperature Control for Safety Food (TCS Food)

	IN	OUT	N/O	N/A	COS	REPEAT
19. Proper reheating procedures for hot holding	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
20. Proper cooling time & temperatures	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
21. Proper hot holding temperatures	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
22. Proper cold holding temperatures	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
23. Proper Date Marking	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
23B. TCS Foods Disposition	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
24A. Time as a public health control: procedures	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
24B. Time as a public health control: temperatures & discarding food	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
24C. Time as a public health control: highly susceptible population (HSP)	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

### Consumer Advisory

	IN	OUT	N/O	N/A	COS	REPEAT
25. Consumer advisory provided for raw or undercooked foods	<input checked="" type="radio"/>	<input type="radio"/>		<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

### Highly Susceptible Populations (HSP)

	IN	OUT	N/O	N/A	COS	REPEAT
26A. Pasteurized foods used; prohibited foods not offered	<input checked="" type="radio"/>	<input type="radio"/>		<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
26B. Reservice of foods	<input checked="" type="radio"/>	<input type="radio"/>		<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

### Chemical

	IN	OUT	N/O	N/A	COS	REPEAT
27. Food additives: approved and properly used	<input type="radio"/>	<input type="radio"/>		<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
28A. Toxic substances identified, stored and used	<input checked="" type="radio"/>	<input type="radio"/>		<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
28B. Poisonous materials, sanitizers, additives, medicines restriction, separation, storage	<input checked="" type="radio"/>	<input type="radio"/>		<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
28C. Conditions of Use: law	<input checked="" type="radio"/>	<input type="radio"/>		<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

### Conformance with Approved Procedures

	IN	OUT	N/O	N/A	COS	REPEAT
29A. Compliance with variance, specialized process, & HACCP plan	<input type="radio"/>	<input type="radio"/>		<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
29B. Treating juice- HACCP, reduced oxygen packaging w/out variance, conformance with approved procedures	<input type="radio"/>	<input type="radio"/>		<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
29C. When HACCP plan is required	<input type="radio"/>	<input type="radio"/>		<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

### GOOD RETAIL PRACTICES

Good Retail Practices are preventative measures to control the addition of pathogens, chemicals, and physical objects into foods.

IN = In compliance    OUT = not in compliance    COS - corrected on -site during inspection    REPEAT = repeat violation

### Safe Food and Water

	IN	OUT	N/O	N/A	COS	REPEAT
30. Pasteurized eggs used where required	<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>
31A. Water & ice from approved source	<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>
31B. Sampling, alternative water supply	<input type="radio"/>	<input type="radio"/>		<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
31C. Sampling report	<input type="radio"/>	<input type="radio"/>		<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

Inspector \_\_\_\_\_

Acknowledged Receipt : \_\_\_\_\_

Page 3 of 7

## Food Establishment Inspection Report - FDA

### Safe Food and Water

32. Variance obtained for specialized processing methods

IN	OUT	N/O	N/A	COS	REPEAT
<input type="radio"/>	<input type="radio"/>		<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

### Food Temperature Control

33A. Proper cooling methods used; adequate equipment for temperature control

IN	OUT	N/O	N/A	COS	REPEAT
<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>

33B. Frozen food

<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>
----------------------------------	-----------------------	--	--	--------------------------	--------------------------

34. Plant food properly cooked for hot holding

<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
----------------------------------	-----------------------	-----------------------	-----------------------	--------------------------	--------------------------

35. Approved thawing methods used

<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
-----------------------	-----------------------	-----------------------	----------------------------------	--------------------------	--------------------------

36A. Thermometers provided and accurate

<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>
----------------------------------	-----------------------	--	--	--------------------------	--------------------------

36B. Thermometers function properly

<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>
----------------------------------	-----------------------	--	--	--------------------------	--------------------------

### Food Identification

37A. Food properly labeled; original container

IN	OUT	COS	REPEAT
<input type="radio"/>	<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

Fail Notes

3-302.12

*Food Storage Containers Identified with Common Name of Food  
[The tomato ketchup had been removed from its original container and its new container had not been labelled. Foods which have been removed from its original packaging/container must be clearly labelled in order to avoid severe medical consequences.]*

37B. Food labels, labeling of ingredients

<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
----------------------------------	-----------------------	--------------------------	--------------------------

### Prevention of Food Contamination

38A. Insects, rodents, & animals not present

IN	OUT	COS	REPEAT
<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

38B. Handling prohibition, controlling pests, prohibiting animals

<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
----------------------------------	-----------------------	--------------------------	--------------------------

39A. Contamination prevented during food storage

<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
----------------------------------	-----------------------	--------------------------	--------------------------

39B. Food display; ice used as an exterior coolant prohibited as an ingredient

<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
----------------------------------	-----------------------	--------------------------	--------------------------

39C. Consumer self-service operations- utensils and monitoring

<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
----------------------------------	-----------------------	--------------------------	--------------------------

40A. Personal cleanliness- prohibition jewelry

<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
----------------------------------	-----------------------	--------------------------	--------------------------

40B. Maintenance of fingernails

<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
----------------------------------	-----------------------	--------------------------	--------------------------

41. Wiping cloths; properly used and stored

<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
----------------------------------	-----------------------	--------------------------	--------------------------

42A. Washing Produce - following chemical manufacturers label

<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
----------------------------------	-----------------------	--------------------------	--------------------------

42B. Washing produce

<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
----------------------------------	-----------------------	--------------------------	--------------------------

42C. Washing produce- chemicals

<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
----------------------------------	-----------------------	--------------------------	--------------------------

### Proper Use of Utensils

43. In-use utensils; properly stored

IN	OUT	COS	REPEAT
<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

44. Utensils, equipment & linens; properly stored, dried, and handled

<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
----------------------------------	-----------------------	--------------------------	--------------------------

45A. Single-use/ single service articles properly stored and used, required

<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
----------------------------------	-----------------------	--------------------------	--------------------------

45B. Single-use/service articles use limitation, kitchenware and tableware preventing contamination

<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
----------------------------------	-----------------------	--------------------------	--------------------------

46. Gloves used properly

<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
----------------------------------	-----------------------	--------------------------	--------------------------

Inspector

Acknowledged Receipt :

Page 4 of 7

## Food Establishment Inspection Report - FDA

### Utensils, Equipment and Vending

	IN	OUT	COS	REPEAT
47A. Food & non-food contact surfaces cleanable	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
47B. Food contact surfaces /utensils cleanability, molluscan shellfish tanks, consumer self-service	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
47C. Properly designed characteristics: food and non-food contact surfaces, molluscan shellfish tanks	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
48A. Warewashing facilities: installed, maintained, & used; test strips	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
<b><i>This item has Notes. See Footnote 1 at end of questionnaire.</i></b>				
48B. Operational warewashing machines	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
49. Non-food contact surfaces clean	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

### Physical Facilities

	IN	OUT	N/A	COS	REPEAT
50. Hot & cold water available; adequate pressure	<input checked="" type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>
51A. Plumbing installed; proper backflow devices	<input checked="" type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>
51B. Prohibiting a cross-connection, inspection and servicing system	<input checked="" type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>
51C. Approved system and cleanable fixtures, service sink	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
52A. Sewage and waste water properly disposed	<input checked="" type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>
52B. Grease traps easily accessible for cleaning	<input checked="" type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>
52C. Removing mobile food establishment waste	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
53A. Toilet facilities; properly constructed, supplied, & cleaned	<input checked="" type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>
53B. Toilet tissue availability	<input checked="" type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>
54. Garbage & refuse properly disposed; facilities maintained	<input checked="" type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>
55A. Physical facilities installed, maintained, & clean	<input checked="" type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>
55B. Private homes and living or sleeping quarters, use prohibition	<input checked="" type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>
56. Adequate ventilation & lighting; designated areas used	<input checked="" type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>

### MASSACHUSETTS ONLY REGULATIONS

Rules and Regulations adopted for use in Massachusetts only.

#### Facilities

	IN	OUT	COS	REPEAT
57A. Catering	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
57B. When plans are reviewed, prerequisite for operations- valid permit	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
57C. Contents of plans and specifications, preoperational inspections	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
58. Mobile Food Operations	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
59. Temporary Food Establishments	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
60. Residential Kitchens	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

#### Procedures

	IN	OUT	COS	REPEAT
61. Anti-choking Procedures	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

Inspector \_\_\_\_\_

Acknowledged Receipt : \_\_\_\_\_

Page 5 of 7

## Food Establishment Inspection Report - FDA

### Procedures

62. Tobacco Products: Notice and Sale

***This item has Notes. See Footnote 2 at end of questionnaire.***

63. Food Allergy Awareness Requirements

IN    OUT    COS    REPEAT

☐    ☐    ☐    ☐

☒    ☐    ☐    ☐

Inspector \_\_\_\_\_

Acknowledged Receipt : \_\_\_\_\_

Page 6 of 7

## Food Establishment Inspection Report - FDA

### **Footnote 1**

**Notes:**

Kitchen does not have a dishwasher.  
3 bay sink in use and is being used correctly.

### **Footnote 2**

**Notes:**

Tobacco products not on sale

---

Inspector

---

Acknowledged Receipt :

Page 7 of 7



**City of Newton**  
**Health and Human Services**  
 Deborah Youngblood, PhD, Commissioner  
 1000 Commonwealth Ave Newton, MA 02459  
 (617) 796-1420



**Public Health**  
 Prevent. Promote. Protect.

**Food Establishment Inspection Report - FDA**

**Insp Date:** 6/7/2018  
**Business:** Ward School  
 10 Dolphin Rd.

**Business ID:** 1N2380

Newton, MA 02459

**Inspection:** 4N000456

**Section:** 1

**Phone:** 617-559-6450

**Inspector:** 1N11124 Samantha Menard

**Reason:** 1-Routine

**Results:** No Follow-up

**Inspection Summary**

Official Order for Correction: Based on an inspection today, the items checked indicate violations of 105 CMR 590.000/ 2009 Federal Food Code. This report, when signed below by the Commissioner of Health / Agent constitutes an order by the Commissioner of Health. Failure to correct violations cited in this report may result in suspension or revocation of the food establishment permit and cessation of food establishment operations. If aggrieved by this order, you have the right to a hearing. The request must be in writing and submitted to the Commissioner of Health at the above address within 10 days of receipt of this order.

Est. Type 1 - Food Svc Establis License/Permit # \_\_\_\_\_ Risk Category 02 Risk Level Observed 02 Low

**FOODBORNE ILLNESS RISK FACTORS AND PUBLIC HEALTH INTERVENTIONS**

Compliance status: IN = in compliance OUT = not in compliance N/O = not observed N/A = not applicable

Marked in appropriate box for COS and/or R. COS = corrected on-site during inspection R = repeat violation

Risk factors are improper practices or procedures identified as the most prevalent contributing factors of foodborne illness or injury. Public Health interventions are control measures to prevent foodborne illnesses or injury.

**Supervision**

1A. PIC Present

IN OUT N/O N/A COS REPEAT

☒ ☐ ☐ ☐ ☐ ☐

B. Cert. food manager, knowledge, no critical violations

☐ ☒ ☐ ☐ ☐ ☐

Fail Notes 2-102.20

*Food Protection Manager Certification*

*[Food protection manager certification was not available. PIC claimed he was a certified food manager. Ensure PIC is a certified food protection manager.]*

C. Duties of PIC

☒ ☐ ☐ ☐ ☐ ☐

**Employee Health**

2. Management, food employee and conditional employee; knowledge, responsibilities and reporting

IN OUT N/O N/A COS REPEAT

☒ ☐ ☐ ☐ ☐ ☐

3. Proper use of restriction and exclusion

☒ ☐ ☐ ☐ ☐ ☐

**Good Hygienic Practices**

4A. Proper eating, tasting, drinking, or tobacco use

IN OUT N/O N/A COS REPEAT

☒ ☐ ☐ ☐ ☐ ☐

*Samantha Menard*

Inspector

Acknowledged Receipt : Greg

Page 1 of 5

## Food Establishment Inspection Report - FDA

Good Hygienic Practices		IN	OUT	N/O	N/A	COS	REPEAT
B. Preventing contamination when tasting		<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>
5. No discharge from eyes, nose, and mouth		<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>
Preventing Contamination by Hands		IN	OUT	N/O	N/A	COS	REPEAT
6A. Hands clean & properly washed		<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>
B. Where to wash, hand antiseptics		<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>
7. No bare hand contact with RTE food or a pre-approved alternative procedure properly allowed		<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
8A. Adequate handwashing sinks properly supplied and accessible		<input type="radio"/>	<input checked="" type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>
Fail Notes	6-301.12 Hand Drying Provision <i>[The paper towel dispenser above the hand washing sink was empty. Ensure that there is always an appropriate hand drying provision available at the hand washing sink.]</i>						
B. Handwashing sinks accesible with proper signage, handwashing aids		<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>
C. Conveniently located handwashing sink		<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>
Approved Sources		IN	OUT	N/O	N/A	COS	REPEAT
9A. Milk, eggs, juice, bottled water, hermetically sealed food		<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>
B. Fish and shellfish		<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
10. Food received at proper temperature		<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
11. Food in good condition, safe, & unadulterated		<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>
Protection from Contamination		IN	OUT	N/O	N/A	COS	REPEAT
12A. Food separated & protected		<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
B. Gloves, use limitation, one task- contaminated		<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
13A. Food-contact surfaces: cleaned & sanitized 171° F		<input type="radio"/>	<input checked="" type="radio"/>		<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
Fail Notes	4-703.11 *Methods of Sanitization - Hot Water and Chemical <i>[PIC stated he only keeps equipment and utensils in sanitizer for 15 seconds. As per the instructions on the sanitizer, items must have a minimum of 1 minute contact time with the sanitizer to achieve proper sanitization.]</i>						
B. Food contact surfaces cleaned and sanitized NMT 194° F, NLT 180° F		<input type="radio"/>	<input type="radio"/>		<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
C. Mechanical warewashing equipment sanitization food contact surfaces, equip., utensils		<input checked="" type="radio"/>	<input type="radio"/>		<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
14. Proper disposition of returned, previously served reconditions, & unsafe food		<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>
Potentially Hazardous Food Time/Temperature		IN	OUT	N/O	N/A	COS	REPEAT
15. Proper cooking time & temperatures		<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
16. Proper reheating procedures for hot holding		<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
17. Proper cooling time & temperatures		<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
18. Proper hot holding temperatures		<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

*Sam M...*

Inspector

Acknowledged Receipt : Greg

Page 2 of 5

## Food Establishment Inspection Report - FDA

Potentially Hazardous Food Time/Temperature

IN OUT N/O N/A COS REPEAT

*Fail Notes* | 3-501.16 (A) \*Hot PHFs Maintained at or Above 135oF  
[Corn dogs in the hot holding unit were 130°F. Warm  
TCS foods must be kept at 135°F or above. PIC turned  
the hot holding unit up.]

19. Proper cold holding temperatures

☒ ☐ ☐ ☐ ☐ ☐

20. Time as a public health control: procedures & record

☐ ☐ ☐ ☒ ☐ ☐

Highly Susceptible Populations

IN OUT N/O N/A COS REPEAT

21. Pasteurized foods used; prohibited foods not offered

☐ ☐ ☒ ☐ ☐

Chemical

IN OUT N/O N/A COS REPEAT

22. Food additives: approved and properly used

☐ ☐ ☒ ☐ ☐

23A. Toxic substances properly identified, stored and used

☒ ☐ ☐ ☐ ☐

B. Restriction presence and use, restriction and storage of medicines

☒ ☐ ☐ ☐ ☐

C. Storage- other personal care items

☒ ☐ ☐ ☐ ☐

### GOOD RETAIL PRACTICES

Good Retail Practices are preventative measures to control the addition of pathogens, chemicals, and physical objects into foods.

IN = In compliance OUT = not in compliance COS - corrected on -site during inspection REPEAT = repeat violation

Safe Food and Water

IN OU N/ N/A CO REPEA

24. Water & ice from approved source

☒ ☐ ☐ ☐ ☐ ☐

Food Temperature Control

IN OUT N/O N/A COS REPEAT

25A. Proper cooling methods used; adequate equipment for temperature control

☐ ☐ ☐ ☒ ☐ ☐

B. Frozen food

☒ ☐ ☐ ☐ ☐ ☐

26. Plant food properly cooked for hot holding

☒ ☐ ☐ ☐ ☐ ☐

27. Approved thawing methods used

☒ ☐ ☐ ☐ ☐ ☐

28A. Thermometers provided and accurate

☒ ☐ ☐ ☐ ☐ ☐

B. Thermometers function properly

☒ ☐ ☐ ☐ ☐ ☐

Food Identification

IN OUT COS REPEAT

29A. Food properly labeled; original container

☐ ☒ ☐ ☐

*Fail Notes* | 3-302.12 Food Storage Containers Identified with Common Name of Food  
[Condiment bottles in cafeteria were not labeled. Working containers  
holding food removed from their original packaging must be labeled  
with their common name.]

B. Food labels, labeling of ingredients

☒ ☐ ☐ ☐

Prevention of Food Contamination

IN OUT COS REPEAT

30A. Insects, rodents, & animals not present

☒ ☐ ☐ ☐

B. Handling prohibition, controlling pests, prohibiting animals

☒ ☐ ☐ ☐

*Sam M...*

Inspector

Acknowledged Receipt : Greg

Page 3 of 5

## Food Establishment Inspection Report - FDA

Prevention of Food Contamination	IN	OUT	COS	REPEAT		
31A. Contamination prevented during food storage	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>		
B. Food display; ice used as an exterior coolant prohibited as an ingredient	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>		
C. Consumer self-service operations- utensils and monitoring	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>		
32A. Personal cleanliness- prohibition jewelry	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>		
B. Maintenance of fingernails	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>		
33. Wiping cloths; properly used and stored	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>		
34. Washing fruits & vegetables	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>		
Proper Use of Utensils	IN	OUT	COS	REPEAT		
35. In-use utensils; properly stored	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>		
36. Utensils, equipment & linens; properly stored, dried, and handled	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>		
37A. Single-use/ single service articles properly stored and used, required	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>		
B. Single-use/service articles use limitation, kitchenware and tableware preventing contamination	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>		
38. Gloves used properly	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>		
Utensils, Equipment and Vending	IN	OUT	COS	REPEAT		
39A. Food & non-food contact surfaces cleanable	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>		
B. Food contact surfaces /utensils cleanability, molluscan shellfish tanks, consumer self-service	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>		
C. Properly designed characteristics: food and non-food contact surfaces, molluscan shellfish tanks	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>		
40A. Warewashing facilities: installed, maintained, & used; test strips	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>		
B. Operational warewashing machines	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>		
41. Non-food contact surfaces clean	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>		
Physical Facilities	IN	OUT	N/O	N/A	COS	REPEAT
42. Hot & cold water available; adequate pressure	<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>
43A. Plumbing installed; proper backflow devices	<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>
B. Prohibiting a cross-connection, non-drinking water, system maintained in good repair	<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>
C. Approved system and cleanable fixtures, service sink	<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>
44A. Sewage and waste water properly disposed	<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>
B. Grease traps easily accessible for cleaning	<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>
45A. Toilet facilities; properly constructed, supplied, & cleaned	<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>
B. Toilet tissue availability	<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>
46. Garbage & refuse properly disposed; facilities maintained	<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>
47A. Physical facilities installed, maintained, & clean	<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>
B. Cleaning maintenance tools, preventing contamination	<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>

*Sam Menard*

Inspector

Acknowledged Receipt : Greg

Page 4 of 5

## Food Establishment Inspection Report - FDA

### Physical Facilities

IN OUT N/O N/A COS REPEAT

48. Adequate ventilation & lighting; designated areas used

☒ ☐ ☐ ☐

### MASSACHUSETTS ONLY REGULATIONS

Rules and Regulations adopted for use in Massachusetts only.

#### Facilities

IN OU CO REPEA

49A. When plans are reviewed, prerequisite for operations- valid permit

☐ ☐ ☐ ☐

B. Contents of plans and specifications, preoperational inspections

☐ ☐ ☐ ☐

#### Procedures

IN OUT COS REPEAT

50. Anti-choking Procedures

☒ ☐ ☐ ☐

51. Tobacco Products: Notice and Sale

☐ ☐ ☐ ☐



Inspector

Acknowledged Receipt : Greg

Page 5 of 5



**City of Newton**  
**Health and Human Services**  
 Deborah Youngblood, PhD, Commissioner  
 1000 Commonwealth Ave Newton, MA 02459  
 (617) 796-1420



**Public Health**  
 Prevent. Promote. Protect.

**Food Establishment Inspection Report - FDA**

**Insp Date:** 11/2/2018  
**Business:** Ward School  
 10 Dolphin Rd.  
 Newton, MA 02459

**Business ID:** 1N2380

**Inspection:** 6N000060  
**Section:** 1  
**Phone:** 617-559-6450  
**Inspector:** 1N11123 Nicola Assan  
**Reason:** 1-Routine  
**Results:** No Follow-up R2

**Inspection Summary**

Official Order for Correction: Based on an inspection today, the items checked indicate violations of 105 CMR 590.000/ 2013 Federal Food Code. This report, when signed below by the Commissioner of Health / Agent constitutes an order by the Commissioner of Health. Failure to correct violations cited in this report may result in suspension or revocation of the food establishment permit and cessation of food establishment operations. If aggrieved by this order, you have the right to a hearing. The request must be in writing and submitted to the Commissioner of Health at the above address within 10 days of receipt of this order.

Est. Type 1 - Food Svc Establis License/Permit # \_\_\_\_\_ Risk Category 02 Risk Level Observed 02 Low

Foodborne Illness Complaint Investigated (All) ☐ Involving More Than Two Persons ☐

**FOODBORNE ILLNESS RISK FACTORS AND PUBLIC HEALTH INTERVENTIONS**

Compliance status: IN = in compliance OUT = not in compliance N/O = not observed N/A = not applicable

Marked in appropriate box for COS and/or R. COS = corrected on-site during inspection R = repeat violation

Risk factors are improper practices or procedures identified as the most prevalent contributing factors of foodborne illness or injury. Public Health Interventions are control measures to prevent foodborne illnesses or injury.

**Supervision**

1. PIC Present, Knowledge and Duties
2. Certified Food Protection Manager

IN	OUT	N/O	N/A	COS	REPEAT
<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>
<input checked="" type="radio"/>	<input type="radio"/>		<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

***This item has Notes. See Footnote 1 at end of questionnaire.***

**Employee Health / Responding to Contamination Events**

- 3A. Employee Health: PIC Knowledge, Responsibilities & Reporting
- 3B. Employee Reporting to PIC
4. Proper Use of Restriction & Exclusion
5. Clean-up of Vomiting and Diarrheal Events

IN	OUT	N/O	N/A	COS	REPEAT
<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>
<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>
<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>
<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>

**Good Hygienic Practices**

- 6A. Proper eating, tasting, drinking, or tobacco use
- 6B. Preventing contamination when tasting

IN	OUT	N/O	N/A	COS	REPEAT
<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>
<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>

*Assan*

Inspector

Acknowledged Receipt : Tim Viveiros

Page 1 of 7

## Food Establishment Inspection Report - FDA

### Good Hygienic Practices

7. No discharge from eyes, nose, and mouth

IN	OUT	N/O	N/A	COS	REPEAT
<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>

### Control of Hands as a Vehicle of Contamination

8A. Hands clean & properly washed

IN	OUT	N/O	N/A	COS	REPEAT
<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>

8B. Where to wash, hand antiseptics

IN	OUT	N/O	N/A	COS	REPEAT
<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>

9. No bare hand contact with RTE food or a pre-approved alternative procedure properly allowed

IN	OUT	N/O	N/A	COS	REPEAT
<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

10A. Adequate handwashing sinks properly supplied and accessible

IN	OUT	N/O	N/A	COS	REPEAT
<input type="radio"/>	<input checked="" type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>

#### Fail Notes

5-205.11

#### Accessibility, Operation and Maintenance

[There was a bag of pepperoni and a box of fruit cups being stored in and on the handsink respectively. A handsink can only be used for handwashing, do not dump anything into the handsinks. A handwashing sink shall be maintained so that it is accessible at all times for employee use. A handwashing sink may not be used for purposes other than handwashing and restricted for that use. Convenient accessibility of a handwashing facility encourages timely handwashing which provides a break in the chain of contamination from the hands of food employees to food or food contact surfaces. Sinks used for food preparation and ware washing can become sources of contamination if used as handwashing facilities by employees returning from the toilet or duties which have contaminated their hands.]

10B. Handwashing sinks accesible with proper signage, handwashing aids

IN	OUT	N/O	N/A	COS	REPEAT
<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>

### Approved Sources

11A. Milk, eggs, juice, bottled water, hermetically sealed food, game animals

IN	OUT	N/O	N/A	COS	REPEAT
<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

11B. Packaged foods, labeling, whole muscle beef

IN	OUT	N/O	N/A	COS	REPEAT
<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

11C. Obtaining raw fish, packaged meat & poultry, eggs

IN	OUT	N/O	N/A	COS	REPEAT
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

12A. Food received at proper temperature

IN	OUT	N/O	N/A	COS	REPEAT
<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

12B. Shipping and receiving frozen food

IN	OUT	N/O	N/A	COS	REPEAT
<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

13. Food in good condition, honestly presented, safe, & unadulterated

IN	OUT	N/O	N/A	COS	REPEAT
<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>

13B. Food package integrity

IN	OUT	N/O	N/A	COS	REPEAT
<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>

14A. Required records available: shellstock tags, parasite destruction

IN	OUT	N/O	N/A	COS	REPEAT
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

14B. Missing shellstock tags, destruction

IN	OUT	N/O	N/A	COS	REPEAT
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

14C. Parasite destruction- storing raw/partially cooked fish

IN	OUT	N/O	N/A	COS	REPEAT
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

### Protection from Contamination

15A. Food separated & protected

IN	OUT	N/O	N/A	COS	REPEAT
<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

15B. Cleaning equip/utensils/food containers

IN	OUT	N/O	N/A	COS	REPEAT
<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

16A. Food-contact surfaces: cleaned & sanitized immersion 171° F and above

IN	OUT	N/O	N/A	COS	REPEAT
<input type="radio"/>	<input checked="" type="radio"/>		<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

*Assan*

Inspector

Acknowledged Receipt : Tim Viveiros

Page 2 of 7

## Food Establishment Inspection Report - FDA

### Protection from Contamination

**Fail Notes**    4-501.114 (A-E, F 1&2)    *Chemical Sanitization - Temperature, pH, Concentration and Hardness*  
*[The temperature of the sanitizing solution in the 3 bay compartment sink was 72.0 degrees fahrenheit. A quaternary ammonium compound solution shall have a minimum temperature of 75 degrees fahrenheit.]*

16B. Food contact surfaces cleaned and sanitized NMT 194° F, NLT 180° F	⊙	○	○	□	□
16C. Mechanical warewashing equipment sanitization food contact surfaces, equip., utensils	⊙	○	○	□	□
17. Proper disposition of returned, previously served reconditions, & unsafe food	⊙	○		□	□

### Time/Temperature Control for Safety Food (TCS Food)

	IN	OUT	N/O	N/A	COS	REPEAT
18A. Proper cooking time & temperatures	○	○	○	⊙	□	□
18B. Whole meat cooking and serving, storing	○	○	○	⊙	□	□
18C. Microwave cooking of raw animal foods	○	○	○	⊙	□	□
19. Proper reheating procedures for hot holding	○	○	○	⊙	□	□
20. Proper cooling time & temperatures	○	○	○	⊙	□	□
21. Proper hot holding temperatures	⊙	○	○	○	□	□
22. Proper cold holding temperatures	⊙	○	○	○	□	□
23. Proper Date Marking	⊙	○	○	○	□	□
23B. TCS Foods Disposition	⊙	○	○	○	□	□
24A. Time as a public health control: procedures	○	○	○	⊙	□	□
24B. Time as a public health control: temperatures & discarding food	○	○	○	⊙	□	□
24C. Time as a public health control: highly susceptible population (HSP)	○	○	○	⊙	□	□

### Consumer Advisory

25. Consumer advisory provided for raw or undercooked foods	○	○	○	⊙	□	□
---	---	---	---	---	---	---

### Highly Susceptible Populations (HSP)

26A. Pasteurized foods used; prohibited foods not offered	○	○	○	⊙	□	□
26B. Reservice of foods	○	○	○	⊙	□	□

### Chemical

	IN	OUT	N/O	N/A	COS	REPEAT
27. Food additives: approved and properly used	○	○		⊙	□	□
28A. Toxic substances identified, stored and used	⊙	○		○	□	□
28B. Poisonous materials, sanitizers, additives, medicines restriction, separation, storage	⊙	○		○	□	□
28C. Conditions of Use: law	⊙	○		○	□	□

### Conformance with Approved Procedures

29A. Compliance with variance, specialized process, & HACCP plan	○	○	○	⊙	□	□
--	---	---	---	---	---	---



Inspector

Acknowledged Receipt : Tim Viveiros

Page 3 of 7

## Food Establishment Inspection Report - FDA

### Conformance with Approved Procedures

	IN	OUT	N/O	N/A	COS	REPEAT
29B. Treating juice- HACCP, reduced oxygen packaging w/out variance, conformance with approved procedures	<input type="radio"/>	<input type="radio"/>		<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
29C. When HACCP plan is required	<input type="radio"/>	<input type="radio"/>		<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

### GOOD RETAIL PRACTICES

Good Retail Practices are preventative measures to control the addition of pathogens, chemicals, and physical objects into foods.

IN = In compliance OUT = not in compliance COS - corrected on -site during inspection REPEAT = repeat violation

### Safe Food and Water

	IN	OUT	N/O	N/A	COS	REPEAT
30. Pasteurized eggs used where required	<input type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>
31A. Water & ice from approved source	<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>
31B. Sampling, alternative water supply	<input type="radio"/>	<input type="radio"/>		<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
31C. Sampling report	<input type="radio"/>	<input type="radio"/>		<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
32. Variance obtained for specialized processing methods	<input type="radio"/>	<input type="radio"/>		<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

### Food Temperature Control

	IN	OUT	N/O	N/A	COS	REPEAT
33A. Proper cooling methods used; adequate equipment for temperature control	<input type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>
33B. Frozen food	<input type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>
34. Plant food properly cooked for hot holding	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
35. Approved thawing methods used	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
36A. Thermometers provided and accurate	<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>
36B. Thermometers function properly	<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>

### Food Identification

	IN	OUT	COS	REPEAT
37A. Food properly labeled; original container	<input type="radio"/>	<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

*Fail Notes*    3-302.12    *Food Storage Containers Identified with Common Name of Food*  
*[The squeeze bottles of tomato ketchup were not labeled. Working*  
*containers of food/ingredients that are removed from their original*  
*packages for use shall be identified with the common name of the food.*  
*Label all containers, bins and squeeze bottles.]*

37B. Food labels, labeling of ingredients	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
---	----------------------------------	-----------------------	--------------------------	--------------------------

### Prevention of Food Contamination

	IN	OUT	COS	REPEAT
38A. Insects, rodents, & animals not present	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
38B. Handling prohibition, controlling pests, prohibiting animals	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
39A. Contamination prevented during food storage	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
39B. Food display; ice used as an exterior coolant prohibited as an ingredient	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
39C. Consumer self-service operations- utensils and monitoring	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
40A. Personal cleanliness- prohibition jewelry	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
40B. Maintenance of fingernails	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

Inspector

Acknowledged Receipt : Tim Viveiros

Page 4 of 7

## Food Establishment Inspection Report - FDA

Prevention of Food Contamination		IN	OUT	COS	REPEAT	
41. Wiping cloths; properly used and stored		<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>	
42A. Washing Produce - following chemical manufacturers label		<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>	
42B. Washing produce		<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>	
42C. Washing produce- chemicals		<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Proper Use of Utensils		IN	OUT	COS	REPEAT	
43. In-use utensils; properly stored		<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>	
44. Utensils, equipment & linens; properly stored, dried, and handled		<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>	
45A. Single-use/ single service articles properly stored and used, required		<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>	
45B. Single-use/service articles use limitation, kitchenware and tableware preventing contamination		<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>	
46. Gloves used properly		<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Utensils, Equipment and Vending		IN	OUT	COS	REPEAT	
47A. Food & non-food contact surfaces cleanable		<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>	
47B. Food contact surfaces /utensils cleanability, molluscan shellfish tanks, consumer self-service		<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>	
47C. Properly designed characteristics: food and non-food contact surfaces, molluscan shellfish tanks		<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>	
48A. Warewashing facilities: installed, maintained, & used; test strips		<input type="radio"/>	<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>	
<div style="display: flex; align-items: flex-start;"> <div style="width: 150px; border-right: 1px solid black; padding-right: 5px;"> <i>Fail Notes</i> </div> <div> <b>4-501.19</b>    <i>Manual warewashing equipment, wash solution temperature</i>  <i>[The temperature of the wash solution in the 3 bay compartment sink was 103.1 degrees fahrenheit. The temperature of the wash solution in manual warewashing equipment shall be maintained at not less than 110 degrees fahrenheit or the temperature specified on the cleaning agent manufacturer's label instructions.]</i> </div> </div>						
48B. Operational warewashing machines		<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>	
49. Non-food contact surfaces clean		<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Physical Facilities		IN	OUT	N/A	COS	REPEAT
50. Hot & cold water available; adequate pressure		<input checked="" type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>
51A. Plumbing installed; proper backflow devices		<input checked="" type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>
51B. Prohibiting a cross-connection, inspection and servicing system		<input checked="" type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>
51C. Approved system and cleanable fixtures, service sink		<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
52A. Sewage and waste water properly disposed		<input checked="" type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>
52B. Grease traps easily accessible for cleaning		<input checked="" type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>
52C. Removing mobile food establishment waste		<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
53A. Toilet facilities; properly constructed, supplied, & cleaned		<input checked="" type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>
53B. Toilet tissue availability		<input checked="" type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>
54. Garbage & refuse properly disposed; facilities maintained		<input checked="" type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>

*Assan*

Inspector

Acknowledged Receipt : Tim Viveiros

Page 5 of 7

## Food Establishment Inspection Report - FDA

### Physical Facilities

	IN	OUT	N/A	COS	REPEAT
55A. Physical facilities installed, maintained, & clean	<input checked="" type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>
55B. Private homes and living or sleeping quarters, use prohibition	<input checked="" type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>
56. Adequate ventilation & lighting; designated areas used	<input checked="" type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>

### MASSACHUSETTS ONLY REGULATIONS

Rules and Regulations adopted for use in Massachusetts only.

### Facilities

	IN	OUT	COS	REPEAT
57A. Catering	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
57B. When plans are reviewed, prerequisite for operations- valid permit	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
57C. Contents of plans and specifications, preoperational inspections	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
58. Mobile Food Operations	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
59. Temporary Food Establishments	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
60. Residential Kitchens	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

### Procedures

	IN	OUT	COS	REPEAT
61. Anti-choking Procedures	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
62. Tobacco Products: Notice and Sale	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
63. Food Allergy Awareness Requirements	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>



Inspector

Acknowledged Receipt : Tim Viveiros

Page 6 of 7

## Food Establishment Inspection Report - FDA

### **Footnote 1**

#### **Notes:**

PIC to attend serve safe course on the 12th November 2018.



Inspector

Acknowledged Receipt : Tim Viveiros

Page 7 of 7



City of Newton  
Health and Human Services  
Deborah Youngblood, PhD, Commissioner  
1000 Commonwealth Ave Newton, MA 02459  
(617) 796-1420



Public Health  
Prevent, Promote, Protect

Food Establishment Inspection Report - FDA

Insp Date: 3/7/2019  
Business: Ward School  
10 Dolphin Rd.

Business ID: 1N2380

Newton, MA 02459

Inspection: 6N000087

Section: 1

Phone: 617-559-6450

Inspector: 1N11123 Nicola Assan

Reason: 1-Routine

Results: No Follow-up R2

Inspection Summary

Official Order for Correction: Based on an inspection today, the items checked indicate violations of 105 CMR 590.000/ 2013 Federal Food Code. This report, when signed below by the Commissioner of Health / Agent constitutes an order by the Commissioner of Health. Failure to correct violations cited in this report may result in suspension or revocation of the food establishment permit and cessation of food establishment operations. If aggrieved by this order, you have the right to a hearing. The request must be in writing and submitted to the Commissioner of Health at the above address within 10 days of receipt of this order.

Est. Type 1 - Food Svc Establis License/Permit # \_\_\_\_\_ Risk Category 02 Risk Level Observed 02 Low

Foodborne Illness Complaint Investigated (All) ☐ Involving More Than Two Persons ☐

FOODBORNE ILLNESS RISK FACTORS AND PUBLIC HEALTH INTERVENTIONS

Compliance status: IN = in compliance OUT = not in compliance N/O = not observed N/A = not applicable

Marked in appropriate box for COS and/or R. COS = corrected on-site during inspection R = repeat violation

Risk factors are improper practices or procedures identified as the most prevalent contributing factors of foodborne illness or injury. Public Health Interventions are control measures to prevent foodborne illnesses or injury.

Supervision

1. PIC Present, Knowledge and Duties

IN OUT N/O N/A COS REPEAT

⊙ ○ □ □

2. Certified Food Protection Manager

○ ⊙ ○ □ □

**This item has Notes. See Footnote 1 at end of questionnaire.**

Fail Notes 2-102.12 (A)

*Certified food protection manager  
[The PIC did not have a serve safe certificate. At least one employee that has supervisory and management responsibility and the authority to direct and control food preparation and service needs to demonstrate required knowledge of food safety through certification and passing an examination that is part of an accredited program.]*

Employee Health / Responding to Contamination Events

3A. Employee Health: PIC Knowledge, Responsibilities & Reporting

IN OUT N/O N/A COS REPEAT

⊙ ○ □ □

3B. Employee Reporting to PIC

⊙ ○ □ □

*Assan*

Inspector

Acknowledged Receipt : Tim Viveiros

Page 1 of 7

## Food Establishment Inspection Report - FDA

### Employee Health / Responding to Contamination Events

4. Proper Use of Restriction & Exclusion

IN OUT N/O N/A COS REPEAT  
☒ ☐ ☐ ☐ ☐ ☐

5. Clean-up of Vomiting and Diarrheal Events

☒ ☐ ☐ ☐ ☐ ☐

### Good Hygienic Practices

6A. Proper eating, tasting, drinking, or tobacco use

☒ ☐ ☐ ☐ ☐ ☐

6B. Preventing contamination when tasting

☒ ☐ ☐ ☐ ☐ ☐

7. No discharge from eyes, nose, and mouth

☒ ☐ ☐ ☐ ☐ ☐

### Control of Hands as a Vehicle of Contamination

8A. Hands clean & properly washed

☒ ☐ ☐ ☐ ☐ ☐

8B. Where to wash, hand antiseptics

☒ ☐ ☐ ☐ ☐ ☐

9. No bare hand contact with RTE food or a pre-approved alternative procedure properly allowed

☒ ☐ ☐ ☐ ☐ ☐

10A. Adequate handwashing sinks properly supplied and accessible

☒ ☐ ☐ ☐ ☐ ☐

10B. Handwashing sinks accessible with proper signage, handwashing aids

☒ ☐ ☐ ☐ ☐ ☐

### Approved Sources

11A. Milk, eggs, juice, bottled water, hermetically sealed food, game animals

☒ ☐ ☐ ☐ ☐ ☐

11B. Packaged foods, labeling, whole muscle beef

☐ ☐ ☐ ☒ ☐ ☐

11C. Obtaining raw fish, packaged meat & poultry, eggs

☐ ☐ ☐ ☒ ☐ ☐

12A. Food received at proper temperature

☐ ☐ ☒ ☐ ☐ ☐

12B. Shipping and receiving frozen food

☐ ☐ ☒ ☐ ☐ ☐

13. Food in good condition, honestly presented, safe, & unadulterated

☒ ☐ ☐ ☐ ☐ ☐

13B. Food package integrity

☒ ☐ ☐ ☐ ☐ ☐

14A. Required records available: shellstock tags, parasite destruction

☐ ☐ ☐ ☒ ☐ ☐

14B. Missing shellstock tags, destruction

☐ ☐ ☐ ☒ ☐ ☐

14C. Parasite destruction- storing raw/partially cooked fish

☐ ☐ ☐ ☒ ☐ ☐

### Protection from Contamination

15A. Food separated & protected

☒ ☐ ☐ ☐ ☐ ☐

15B. Cleaning equip/utensils/food containers

☒ ☐ ☐ ☐ ☐ ☐

16A. Food-contact surfaces: cleaned & sanitized immersion 171° F and above

☒ ☐ ☐ ☐ ☐ ☐

16B. Food contact surfaces cleaned and sanitized NMT 194° F, NLT 180° F

☒ ☐ ☐ ☐ ☐ ☐

16C. Mechanical warewashing equipment sanitization food contact surfaces, equip., utensils

☒ ☐ ☐ ☐ ☐ ☐

17. Proper disposition of returned, previously served reconditions, & unsafe food

☒ ☐ ☐ ☐ ☐ ☐

### Time/Temperature Control for Safety Food (TCS Food)

18A. Proper cooking time & temperatures

IN OUT N/O N/A COS REPEAT  
☐ ☐ ☒ ☐ ☐ ☐

*ASOM*

Inspector

Acknowledged Receipt : Tim Viveiros

Page 2 of 7

## Food Establishment Inspection Report - FDA

Time/Temperature Control for Safety Food (TCS Food)		IN	OUT	N/O	N/A	COS	REPEAT
18B. Whole meat cooking and serving, storing		<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
18C. Microwave cooking of raw animal foods		<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
19. Proper reheating procedures for hot holding		<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
20. Proper cooling time & temperatures		<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
21. Proper hot holding temperatures		<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
<div style="border: 1px solid black; padding: 2px; margin-bottom: 5px;">Fail Notes</div> <div>           3-501.16 (A) <i>*Hot TCS foods Maintained at or Above 135oF, Also for whole meat roasts (130F and above)            [The temperature range for the meatballs in the hot holding unit was 89.6 to 93.0 degrees F. It is apparent that the hot holding unit is not holding foods at 135 degrees F. Have this unit looked at and if it can no longer properly hold food at 135 degrees F or above, then replace the unit. Except during preparation, cooking or cooling, or when time is used as the public health control, TCS (time/temperature control for safety) food shall be maintained at 135 degrees F or above.]</i> </div>							
22. Proper cold holding temperatures		<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
23. Proper Date Marking		<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
23B. TCS Foods Disposition		<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
24A. Time as a public health control: procedures		<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
24B. Time as a public health control: temperatures & discarding food		<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
24C. Time as a public health control: highly susceptible population (HSP)		<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
Consumer Advisory		IN	OUT	N/O	N/A	COS	REPEAT
25. Consumer advisory provided for raw or undercooked foods		<input type="radio"/>	<input type="radio"/>		<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
Highly Susceptible Populations (HSP)		IN	OUT	N/O	N/A	COS	REPEAT
26A. Pasteurized foods used; prohibited foods not offered		<input type="radio"/>	<input type="radio"/>		<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
26B. Reservice of foods		<input type="radio"/>	<input type="radio"/>		<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
Chemical		IN	OUT	N/O	N/A	COS	REPEAT
27. Food additives: approved and properly used		<input type="radio"/>	<input type="radio"/>		<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
28A. Toxic substances identified, stored and used		<input checked="" type="radio"/>	<input type="radio"/>		<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
28B. Poisonous materials, sanitizers, additives, medicines restriction, separation, storage		<input checked="" type="radio"/>	<input type="radio"/>		<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
28C. Conditions of Use: law		<input checked="" type="radio"/>	<input type="radio"/>		<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
Conformance with Approved Procedures		IN	OUT	N/O	N/A	COS	REPEAT
29A. Compliance with variance, specialized process, & HACCP plan		<input type="radio"/>	<input type="radio"/>		<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
29B. Treating juice- HACCP, reduced oxygen packaging w/out variance, conformance with approved procedures		<input type="radio"/>	<input type="radio"/>		<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
29C. When HACCP plan is required		<input type="radio"/>	<input type="radio"/>		<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

*Asson*

Inspector

Acknowledged Receipt : Tim Viveiros

Page 3 of 7

## Food Establishment Inspection Report - FDA

### GOOD RETAIL PRACTICES

Good Retail Practices are preventative measures to control the addition of pathogens, chemicals, and physical objects into foods.

IN = In compliance OUT = not in compliance COS - corrected on -site during inspection REPEAT = repeat violation

#### Safe Food and Water

	IN	OUT	N/O	N/A	COS	REPEAT
30. Pasteurized eggs used where required	<input type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>
31A. Water & ice from approved source	<input type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>
31B. Sampling, alternative water supply	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>
31C. Sampling report	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>
32. Variance obtained for specialized processing methods	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>

#### Food Temperature Control

	IN	OUT	N/O	N/A	COS	REPEAT
33A. Proper cooling methods used; adequate equipment for temperature control	<input type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>
33B. Frozen food	<input type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>
34. Plant food properly cooked for hot holding	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
35. Approved thawing methods used	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
36A. Thermometers provided and accurate	<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>
36B. Thermometers function properly	<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>

#### Food Identification

	IN	OUT	COS	REPEAT
37A. Food properly labeled; original container	<input type="radio"/>	<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
<div style="display: flex;"> <div style="border-right: 1px solid black; padding-right: 10px; margin-right: 10px;"> <i>Fail Notes</i> </div> <div> <div>3-302.12</div> <div> <i>Food Storage Containers Identified with Common Name of Food [Squeeze bottles of ketchup and syrup were not labeled. Working containers holding food or food ingredients that are removed from their original packages for use in the food establishment shall be identified with the common name of the food.]</i> </div> </div> </div>				
37B. Food labels, labeling of ingredients	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

#### Prevention of Food Contamination

	IN	OUT	COS	REPEAT
38A. Insects, rodents, & animals not present	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
38B. Handling prohibition, controlling pests, prohibiting animals	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
39A. Contamination prevented during food storage	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
39B. Food display; ice used as an exterior coolant prohibited as an ingredient	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
39C. Consumer self-service operations- utensils and monitoring	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
40A. Personal cleanliness- prohibition jewelry	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
40B. Maintenance of fingernails	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
41. Wiping cloths; properly used and stored	<input type="radio"/>	<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

*Asson*

Inspector

Acknowledged Receipt : Tim Viveiros

Page 4 of 7

# Food Establishment Inspection Report - FDA

## Prevention of Food Contamination

IN OUT COS REPEAT

Fail Notes

3-304.14

Wiping Cloths, Use Limitation

[The wiping cloths were being stored on the food preparation table. Cloths in use for wiping counters and other equipment surfaces shall be held between uses in a chemical sanitizer solution at a concentration specified on the manufacturer's label.]

42A. Washing Produce - following chemical manufacturers label

☐ ☐ ☐ ☐

42B. Washing produce

☒ ☐ ☐ ☐

42C. Washing produce- chemicals

☐ ☐ ☐ ☐

## Proper Use of Utensils

IN OUT COS REPEAT

43. In-use utensils; properly stored

☒ ☐ ☐ ☐

44. Utensils, equipment & linens; properly stored, dried, and handled

☒ ☐ ☐ ☐

45A. Single-use/ single service articles properly stored and used, required

☒ ☐ ☐ ☐

45B. Single-use/service articles use limitation, kitchenware and tableware preventing contamination

☒ ☐ ☐ ☐

46. Gloves used properly

☒ ☐ ☐ ☐

## Utensils, Equipment and Vending

IN OUT COS REPEAT

47A. Food & non-food contact surfaces cleanable

☒ ☐ ☐ ☐

47B. Food contact surfaces /utensils cleanability, molluscan shellfish tanks, consumer self-service

☒ ☐ ☐ ☐

47C. Properly designed characteristics: food and non-food contact surfaces, molluscan shellfish tanks

☒ ☐ ☐ ☐

48A. Warewashing facilities: installed, maintained, & used; test strips

☒ ☐ ☐ ☐

48B. Operational warewashing machines

☒ ☐ ☐ ☐

49. Non-food contact surfaces clean

☒ ☐ ☐ ☐

## Physical Facilities

IN OUT N/A COS REPEAT

50. Hot & cold water available; adequate pressure

☒ ☐ ☐ ☐

51A. Plumbing installed; proper backflow devices

☒ ☐ ☐ ☐

51B. Prohibiting a cross-connection, inspection and servicing system

☐ ☐ ☐ ☐

51C. Approved system and cleanable fixtures, service sink

☐ ☐ ☐ ☐ ☐

52A. Sewage and waste water properly disposed

☒ ☐ ☐ ☐

52B. Grease traps easily accessible for cleaning

☐ ☐ ☐ ☐

52C. Removing mobile food establishment waste

☐ ☐ ☒ ☐ ☐

53A. Toilet facilities; properly constructed, supplied, & cleaned

☒ ☐ ☐ ☐

53B. Toilet tissue availability

☒ ☐ ☐ ☐

54. Garbage & refuse properly disposed; facilities maintained

☒ ☐ ☐ ☐

55A. Physical facilities installed, maintained, & clean

☒ ☐ ☐ ☐



Inspector

Acknowledged Receipt : Tim Viveiros

Page 5 of 7

## Food Establishment Inspection Report - FDA

### Physical Facilities

	IN	OUT	N/A	COS	REPEAT
55B. Private homes and living or sleeping quarters, use prohibition	<input checked="" type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>
56. Adequate ventilation & lighting; designated areas used	<input checked="" type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>

### MASSACHUSETTS ONLY REGULATIONS

Rules and Regulations adopted for use in Massachusetts only.

### Facilities

	IN	OUT	COS	REPEAT
57A. Catering	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
57B. When plans are reviewed, prerequisite for operations- valid permit	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
57C. Contents of plans and specifications, preoperational inspections	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
58. Mobile Food Operations	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
59. Temporary Food Establishments	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
60. Residential Kitchens	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

### Procedures

	IN	OUT	COS	REPEAT
61. Anti-choking Procedures	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
62. Tobacco Products: Notice and Sale	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
63. Food Allergy Awareness Requirements	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>



Inspector

Acknowledged Receipt : Tim Viveiros

Page 6 of 7

## Food Establishment Inspection Report - FDA

### Footnote 1

#### Notes:

New PIC who has been employed since December 2018.



Inspector

Acknowledged Receipt : Tim Viveiros

Page 7 of 7



City of Newton  
Health and Human Services  
Deborah Youngblood, PhD, Commissioner  
1000 Commonwealth Ave Newton, MA 02459  
(617) 796-1420



Public Health  
Prevent. Promote. Protect.

Food Establishment Inspection Report - FDA

Insp Date: 11/30/2017 Business ID: 1N2390

Business: Williams School  
141 Grove St.

Newton, MA 02466

Inspection: 6N000006

Section: 3

Phone: 617-559-6480

Inspector: 1N11123 Nicola Assan

Reason: 1-Routine

Results: No Follow-up R2

Inspection Summary

Official Order for Correction: Based on an inspection today, the items checked indicate violations of 105 CMR 590.000/ 2013 Federal Food Code. This report, when signed below by the Commissioner of Health / Agent constitutes an order by the Commissioner of Health. Failure to correct violations cited in this report may result in suspension or revocation of the food establishment permit and cessation of food establishment operations. If aggrieved by this order, you have the right to a hearing. The request must be in writing and submitted to the Commissioner of Health at the above address within 10 days of receipt of this order.

Est. Type 1 - Food Svc Establish License/Permit # \_\_\_\_\_ Risk Category 02 Risk Level Observed 02 Low

Foodborne Illness Complaint Investigated (All) ☐ Involving More Than Two Persons ☐

FOODBORNE ILLNESS RISK FACTORS AND PUBLIC HEALTH INTERVENTIONS

Compliance status: IN = in compliance OUT = not in compliance N/O = not observed N/A = not applicable

Marked in appropriate box for COS and/or R. COS = corrected on-site during inspection R = repeat violation

Risk factors are improper practices or procedures identified as the most prevalent contributing factors of foodborne illness or injury. Public Health Interventions are control measures to prevent foodborne illnesses or injury.

Supervision

1. PIC Present, Knowledge and Duties

IN	OUT	N/O	N/A	COS	REPEAT
<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>

2. Certified Food Protection Manager

<input checked="" type="radio"/>	<input type="radio"/>		<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
----------------------------------	-----------------------	--	-----------------------	--------------------------	--------------------------

Employee Health / Responding to Contamination Events

3A. Employee Health: PIC Knowledge, Responsibilities & Reporting

<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>
----------------------------------	-----------------------	--	--	--------------------------	--------------------------

3B. Employee Reporting to PIC

<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>
----------------------------------	-----------------------	--	--	--------------------------	--------------------------

4. Proper Use of Restriction & Exclusion

<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>
----------------------------------	-----------------------	--	--	--------------------------	--------------------------

5. Clean-up of Vomiting and Diarrheal Events

<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>
----------------------------------	-----------------------	--	--	--------------------------	--------------------------

Good Hygienic Practices

6A. Proper eating, tasting, drinking, or tobacco use

IN	OUT	N/O	N/A	COS	REPEAT
<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>

6B. Preventing contamination when tasting

<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>
----------------------------------	-----------------------	-----------------------	--	--------------------------	--------------------------

Inspector

Acknowledged Receipt :

Page 1 of 6

## Food Establishment Inspection Report - FDA

### Good Hygienic Practices

7. No discharge from eyes, nose, and mouth

IN	OUT	N/O	N/A	COS	REPEAT
<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>

### Control of Hands as a Vehicle of Contamination

8A. Hands clean & properly washed

IN	OUT	N/O	N/A	COS	REPEAT
<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>

8B. Where to wash, hand antiseptics

IN	OUT	N/O	N/A	COS	REPEAT
<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>

9. No bare hand contact with RTE food or a pre-approved alternative procedure properly allowed

IN	OUT	N/O	N/A	COS	REPEAT
<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

10A. Adequate handwashing sinks properly supplied and accessible

IN	OUT	N/O	N/A	COS	REPEAT
<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>

10B. Handwashing sinks accesible with proper signage, handwashing aids

IN	OUT	N/O	N/A	COS	REPEAT
<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>

### Approved Sources

11A. Milk, eggs, juice, bottled water, hermetically sealed food, game animals

IN	OUT	N/O	N/A	COS	REPEAT
<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

11B. Packaged foods, labeling, whole muscle beef

IN	OUT	N/O	N/A	COS	REPEAT
<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

11C. Obtaining raw fish, packaged meat & poultry, eggs

IN	OUT	N/O	N/A	COS	REPEAT
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

12A. Food received at proper temperature

IN	OUT	N/O	N/A	COS	REPEAT
<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

12B. Shipping and receiving frozen food

IN	OUT	N/O	N/A	COS	REPEAT
<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

13. Food in good condition, honestly presented, safe, & unadulterated

IN	OUT	N/O	N/A	COS	REPEAT
<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>

13B. Food package integrity

IN	OUT	N/O	N/A	COS	REPEAT
<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>

14A. Required records available: shellstock tags, parasite destruction

IN	OUT	N/O	N/A	COS	REPEAT
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

14B. Missing shellstock tags, destruction

IN	OUT	N/O	N/A	COS	REPEAT
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

14C. Parasite destruction- storing raw/partially cooked fish

IN	OUT	N/O	N/A	COS	REPEAT
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

### Protection from Contamination

15A. Food separated & protected

IN	OUT	N/O	N/A	COS	REPEAT
<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

15B. Cleaning equip/utensils/food containers

IN	OUT	N/O	N/A	COS	REPEAT
<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

16A. Food-contact surfaces: cleaned & sanitized immersion 171° F and above

IN	OUT	N/O	N/A	COS	REPEAT
<input checked="" type="radio"/>	<input type="radio"/>		<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

16B. Food contact surfaces cleaned and sanitized NMT 194° F, NLT 180° F

IN	OUT	N/O	N/A	COS	REPEAT
<input type="radio"/>	<input type="radio"/>		<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

16C. Mechanical warewashing equipment sanitization food contact surfaces, equip., utensils

IN	OUT	N/O	N/A	COS	REPEAT
<input type="radio"/>	<input type="radio"/>		<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

17. Proper disposition of returned, previously served reconditions, & unsafe food

IN	OUT	N/O	N/A	COS	REPEAT
<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>

### Time/Temperature Control for Safety Food (TCS Food)

18A. Proper cooking time & temperatures

IN	OUT	N/O	N/A	COS	REPEAT
<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

18B. Whole meat cooking and serving, storing

IN	OUT	N/O	N/A	COS	REPEAT
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

18C. Microwave cooking of raw animal foods

IN	OUT	N/O	N/A	COS	REPEAT
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

19. Proper reheating procedures for hot holding

IN	OUT	N/O	N/A	COS	REPEAT
<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

20. Proper cooling time & temperatures

IN	OUT	N/O	N/A	COS	REPEAT
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

21. Proper hot holding temperatures

IN	OUT	N/O	N/A	COS	REPEAT
<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>

***This item has Notes. See Footnote 1 at end of questionnaire.***

Inspector \_\_\_\_\_

Acknowledged Receipt : \_\_\_\_\_

Page 2 of 6

## Food Establishment Inspection Report - FDA

Time/Temperature Control for Safety Food (TCS Food)

IN OUT N/O N/A COS REPEAT

Fail Notes 3-501.16 (A) *\*Hot TCS foods Maintained at or Above 135oF, Also for whole meat roasts (130F and above)  
[The temperature of the chicken patties in the hot holding unit was recorded as 128.3 degrees Fahrenheit. The hot holding unit should be able to maintain temperatures of 135 degrees F or above.]*

- |   |                                  |                       |                       |                                  |                          |                          |
|---|----------------------------------|-----------------------|-----------------------|----------------------------------|--------------------------|--------------------------|
| 22. Proper cold holding temperatures                                      | <input checked="" type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/>            | <input type="checkbox"/> | <input type="checkbox"/> |
| 23. Proper Date Marking   | <input checked="" type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/>            | <input type="checkbox"/> | <input type="checkbox"/> |
| 23B. TCS Foods Disposition  | <input type="radio"/>            | <input type="radio"/> | <input type="radio"/> | <input type="radio"/>            | <input type="checkbox"/> | <input type="checkbox"/> |
| 24A. Time as a public health control: procedures                          | <input type="radio"/>            | <input type="radio"/> | <input type="radio"/> | <input checked="" type="radio"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 24B. Time as a public health control: temperatures & discarding food      | <input type="radio"/>            | <input type="radio"/> | <input type="radio"/> | <input checked="" type="radio"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 24C. Time as a public health control: highly susceptible population (HSP) | <input type="radio"/>            | <input type="radio"/> | <input type="radio"/> | <input checked="" type="radio"/> | <input type="checkbox"/> | <input type="checkbox"/> |

Consumer Advisory

IN OUT N/O N/A COS REPEAT

- |   |                                  |                       |                       |                       |                          |                          |
|---|----------------------------------|-----------------------|-----------------------|-----------------------|--------------------------|--------------------------|
| 25. Consumer advisory provided for raw or undercooked foods | <input checked="" type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="checkbox"/> | <input type="checkbox"/> |
|---|----------------------------------|-----------------------|-----------------------|-----------------------|--------------------------|--------------------------|

Highly Susceptible Populations (HSP)

IN OUT N/O N/A COS REPEAT

- |   |                                  |                       |                       |                       |                          |                          |
|---|----------------------------------|-----------------------|-----------------------|-----------------------|--------------------------|--------------------------|
| 26A. Pasteurized foods used; prohibited foods not offered | <input checked="" type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 26B. Reservice of foods                                   | <input checked="" type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="checkbox"/> | <input type="checkbox"/> |

Chemical

IN OUT N/O N/A COS REPEAT

- |   |                                  |                       |                       |                                  |                          |                          |
|---|----------------------------------|-----------------------|-----------------------|----------------------------------|--------------------------|--------------------------|
| 27. Food additives: approved and properly used  | <input type="radio"/>            | <input type="radio"/> | <input type="radio"/> | <input checked="" type="radio"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 28A. Toxic substances identified, stored and used   | <input checked="" type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/>            | <input type="checkbox"/> | <input type="checkbox"/> |
| 28B. Poisonous materials, sanitizers, additives, medicines restriction, separation, storage | <input checked="" type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/>            | <input type="checkbox"/> | <input type="checkbox"/> |
| 28C. Conditions of Use: law   | <input checked="" type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/>            | <input type="checkbox"/> | <input type="checkbox"/> |

Conformance with Approved Procedures

IN OUT N/O N/A COS REPEAT

- |   |                       |                       |                       |                                  |                          |                          |
|---|-----------------------|-----------------------|-----------------------|----------------------------------|--------------------------|--------------------------|
| 29A. Compliance with variance, specialized process, & HACCP plan  | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input checked="" type="radio"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 29B. Treating juice- HACCP, reduced oxygen packaging w/out variance, conformance with approved procedures | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input checked="" type="radio"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 29C. When HACCP plan is required  | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input checked="" type="radio"/> | <input type="checkbox"/> | <input type="checkbox"/> |

GOOD RETAIL PRACTICES

Good Retail Practices are preventative measures to control the addition of pathogens, chemicals, and physical objects into foods.

IN = In compliance OUT = not in compliance COS - corrected on -site during inspection REPEAT = repeat violation

Safe Food and Water

IN OUT N/O N/A COS REPEAT

- |  |                                  |                       |                       |                                  |                          |                          |
|--|----------------------------------|-----------------------|-----------------------|----------------------------------|--------------------------|--------------------------|
| 30. Pasteurized eggs used where required | <input checked="" type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/>            | <input type="checkbox"/> | <input type="checkbox"/> |
| 31A. Water & ice from approved source    | <input checked="" type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/>            | <input type="checkbox"/> | <input type="checkbox"/> |
| 31B. Sampling, alternative water supply  | <input type="radio"/>            | <input type="radio"/> | <input type="radio"/> | <input checked="" type="radio"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 31C. Sampling report                     | <input type="radio"/>            | <input type="radio"/> | <input type="radio"/> | <input checked="" type="radio"/> | <input type="checkbox"/> | <input type="checkbox"/> |

Inspector

Acknowledged Receipt :

Page 3 of 6

## Food Establishment Inspection Report - FDA

Safe Food and Water	IN	OUT	N/O	N/A	COS	REPEAT
32. Variance obtained for specialized processing methods	○	○		⊙	□	□
Food Temperature Control	IN	OUT	N/O	N/A	COS	REPEAT
33A. Proper cooling methods used; adequate equipment for temperature control	⊙	○			□	□
33B. Frozen food	⊙	○			□	□
34. Plant food properly cooked for hot holding	⊙	○	○	○	□	□
35. Approved thawing methods used	○	○	○	⊙	□	□
36A. Thermometers provided and accurate	⊙	○			□	□
36B. Thermometers function properly	⊙	○			□	□
Food Identification	IN	OUT			COS	REPEAT
37A. Food properly labeled; original container		⊙	○		□	□
37B. Food labels, labeling of ingredients		⊙	○		□	□
Prevention of Food Contamination	IN	OUT			COS	REPEAT
38A. Insects, rodents, & animals not present	⊙	○			□	□
38B. Handling prohibition, controlling pests, prohibiting animals	⊙	○			□	□
39A. Contamination prevented during food storage	⊙	○			□	□
39B. Food display; ice used as an exterior coolant prohibited as an ingredient	⊙	○			□	□
39C. Consumer self-service operations- utensils and monitoring	⊙	○			□	□
40A. Personal cleanliness- prohibition jewelry	⊙	○			□	□
40B. Maintenance of fingernails	⊙	○			□	□
41. Wiping cloths; properly used and stored	⊙	○			□	□
42A. Washing Produce - following chemical manufacturers label	⊙	○			□	□
42B. Washing produce	⊙	○			□	□
42C. Washing produce- chemicals	⊙	○			□	□
Proper Use of Utensils	IN	OUT			COS	REPEAT
43. In-use utensils; properly stored	⊙	○			□	□
44. Utensils, equipment & linens; properly stored, dried, and handled	⊙	○			□	□
45A. Single-use/ single service articles properly stored and used, required	⊙	○			□	□
45B. Single-use/service articles use limitation, kitchenware and tableware preventing contamination	⊙	○			□	□
46. Gloves used properly	⊙	○			□	□
Utensils, Equipment and Vending	IN	OUT			COS	REPEAT
47A. Food & non-food contact surfaces cleanable	⊙	○			□	□
47B. Food contact surfaces /utensils cleanability, molluscan shellfish tanks, consumer self-service	⊙	○			□	□

Inspector \_\_\_\_\_

Acknowledged Receipt : \_\_\_\_\_

## Food Establishment Inspection Report - FDA

### Utensils, Equipment and Vending

	IN	OUT	COS	REPEAT
47C. Properly designed characteristics: food and non-food contact surfaces, molluscan shellfish tanks	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
48A. Warewashing facilities: installed, maintained, & used; test strips	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
48B. Operational warewashing machines	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
49. Non-food contact surfaces clean	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

### Physical Facilities

	IN	OUT	N/A	COS	REPEAT
50. Hot & cold water available; adequate pressure	<input checked="" type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>
51A. Plumbing installed; proper backflow devices	<input checked="" type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>
51B. Prohibiting a cross-connection, inspection and servicing system	<input checked="" type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>
51C. Approved system and cleanable fixtures, service sink	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
52A. Sewage and waste water properly disposed	<input checked="" type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>
52B. Grease traps easily accessible for cleaning	<input checked="" type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>
52C. Removing mobile food establishment waste	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
53A. Toilet facilities; properly constructed, supplied, & cleaned	<input checked="" type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>
53B. Toilet tissue availability	<input checked="" type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>
54. Garbage & refuse properly disposed; facilities maintained	<input checked="" type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>
<b><i>This item has Notes. See Footnote 2 at end of questionnaire.</i></b>					
55A. Physical facilities installed, maintained, & clean	<input checked="" type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>
55B. Private homes and living or sleeping quarters, use prohibition	<input checked="" type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>
56. Adequate ventilation & lighting; designated areas used	<input checked="" type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>

### MASSACHUSETTS ONLY REGULATIONS

Rules and Regulations adopted for use in Massachusetts only.

#### Facilities

	IN	OUT	COS	REPEAT
57A. Catering	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
57B. When plans are reviewed, prerequisite for operations- valid permit	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
57C. Contents of plans and specifications, preoperational inspections	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
58. Mobile Food Operations	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
59. Temporary Food Establishments	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
60. Residential Kitchens	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

#### Procedures

	IN	OUT	COS	REPEAT
61. Anti-choking Procedures	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
62. Tobacco Products: Notice and Sale	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
63. Food Allergy Awareness Requirements	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

Inspector \_\_\_\_\_

Acknowledged Receipt : \_\_\_\_\_

Page 5 of 6

## Food Establishment Inspection Report - FDA

### **Footnote 1**

**Notes:**

The LCD display of the hot holding unit was showing temperature fluctuating between 138 and 139 degrees F. The PIC (Meefong Y Chen) informed me that before she places food in the hot holding unit, temperatures above 135 degrees F are recorded. However, the temperature slowly decreases prior to service.

This was flagged up on the previous inspection in October 2016. Will send report to Rachel Oppenheimer (Director of Food Services of Newton Public Schools) and inform her that the hot holding will require repair or replacing.

### **Footnote 2**

**Notes:**

Would recommend an additional bin (small) near the wash hand basin to dispose of paper towels after washing hands.



City of Newton  
Health and Human Services  
Deborah Youngblood, PhD, Commissioner  
1000 Commonwealth Ave Newton, MA 02459  
(617) 796-1420



Public Health  
Prevent, Promote, Protect

Food Establishment Inspection Report - FDA

Insp Date: 6/4/2018  
Business: Williams School  
141 Grove St.

Business ID: 1N2390

Newton, MA 02466

Inspection: CN000438  
Section: 3  
Phone: 617-559-6480  
Inspector: 1N11121 Derek Kwok  
Reason: 1-Routine  
Results: No Follow-up R2

Inspection Summary

Official Order for Correction: Based on an inspection today, the items checked indicate violations of 105 CMR 590.000/ 2013 Federal Food Code. This report, when signed below by the Commissioner of Health / Agent constitutes an order by the Commissioner of Health. Failure to correct violations cited in this report may result in suspension or revocation of the food establishment permit and cessation of food establishment operations. If aggrieved by this order, you have the right to a hearing. The request must be in writing and submitted to the Commissioner of Health at the above address within 10 days of receipt of this order.

Est. Type 1 - Food Svc Establish License/Permit # \_\_\_\_\_ Risk Category 02 Risk Level Observed 02 Low

Foodborne Illness Complaint Investigated (All) ☐ Involving More Than Two Persons ☐

FOODBORNE ILLNESS RISK FACTORS AND PUBLIC HEALTH INTERVENTIONS

Compliance status: IN = in compliance OUT = not in compliance N/O = not observed N/A = not applicable

Marked in appropriate box for COS and/or R. COS = corrected on-site during inspection R = repeat violation

Risk factors are improper practices or procedures identified as the most prevalent contributing factors of foodborne illness or injury. Public Health Interventions are control measures to prevent foodborne illnesses or injury.

Supervision

1. PIC Present, Knowledge and Duties

IN	OUT	N/O	N/A	COS	REPEAT
<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>

2. Certified Food Protection Manager

<input checked="" type="radio"/>	<input type="radio"/>		<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
----------------------------------	-----------------------	--	-----------------------	--------------------------	--------------------------

Employee Health / Responding to Contamination Events

3A. Employee Health: PIC Knowledge, Responsibilities & Reporting

<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>
----------------------------------	-----------------------	--	--	--------------------------	--------------------------

3B. Employee Reporting to PIC

<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>
----------------------------------	-----------------------	--	--	--------------------------	--------------------------

4. Proper Use of Restriction & Exclusion

<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>
----------------------------------	-----------------------	--	--	--------------------------	--------------------------

5. Clean-up of Vomiting and Diarrheal Events

<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>
----------------------------------	-----------------------	--	--	--------------------------	--------------------------

Good Hygienic Practices

6A. Proper eating, tasting, drinking, or tobacco use

<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>
----------------------------------	-----------------------	-----------------------	--	--------------------------	--------------------------

6B. Preventing contamination when tasting

<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>
----------------------------------	-----------------------	-----------------------	--	--------------------------	--------------------------

*[Signature]*

Inspector

Acknowledged Receipt : Newton Public School

Page 1 of 5

## Food Establishment Inspection Report - FDA

### Good Hygienic Practices

7. No discharge from eyes, nose, and mouth

IN	OUT	N/O	N/A	COS	REPEAT
<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>

### Control of Hands as a Vehicle of Contamination

8A. Hands clean & properly washed

IN	OUT	N/O	N/A	COS	REPEAT
<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>

8B. Where to wash, hand antiseptics

IN	OUT	N/O	N/A	COS	REPEAT
<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>

9. No bare hand contact with RTE food or a pre-approved alternative procedure properly allowed

IN	OUT	N/O	N/A	COS	REPEAT
<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

10A. Adequate handwashing sinks properly supplied and accessible

IN	OUT	N/O	N/A	COS	REPEAT
<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>

10B. Handwashing sinks accesible with proper signage, handwashing aids

IN	OUT	N/O	N/A	COS	REPEAT
<input type="radio"/>	<input checked="" type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>

#### Fail Notes

6-301.14

#### Handwashing signage

[A hand washing sign at the food employee's bathroom was not observed. A sign or poster that notifies food employees to wash their hands shall be provided at all Handwashing Sinks used by food employees and shall be clearly visible to food employees. Post a sign or poster.]

### Approved Sources

11A. Milk, eggs, juice, bottled water, hermetically sealed food, game animals

IN	OUT	N/O	N/A	COS	REPEAT
<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

11B. Packaged foods, labeling, whole muscle beef

IN	OUT	N/O	N/A	COS	REPEAT
<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

11C. Obtaining raw fish, packaged meat & poultry, eggs

IN	OUT	N/O	N/A	COS	REPEAT
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

12A. Food received at proper temperature

IN	OUT	N/O	N/A	COS	REPEAT
<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

12B. Shipping and receiving frozen food

IN	OUT	N/O	N/A	COS	REPEAT
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

13. Food in good condition, honestly presented, safe, & unadulterated

IN	OUT	N/O	N/A	COS	REPEAT
<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>

13B. Food package integrity

IN	OUT	N/O	N/A	COS	REPEAT
<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>

14A. Required records available: shellstock tags, parasite destruction

IN	OUT	N/O	N/A	COS	REPEAT
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

14B. Missing shellstock tags, destruction

IN	OUT	N/O	N/A	COS	REPEAT
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

14C. Parasite destruction- storing raw/partially cooked fish

IN	OUT	N/O	N/A	COS	REPEAT
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

### Protection from Contamination

15A. Food separated & protected

IN	OUT	N/O	N/A	COS	REPEAT
<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

15B. Cleaning equip/utensils/food containers

IN	OUT	N/O	N/A	COS	REPEAT
<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

16A. Food-contact surfaces: cleaned & sanitized immersion 171° F and above

IN	OUT	N/O	N/A	COS	REPEAT
<input checked="" type="radio"/>	<input type="radio"/>		<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

16B. Food contact surfaces cleaned and sanitized NMT 194° F, NLT 180° F

IN	OUT	N/O	N/A	COS	REPEAT
<input checked="" type="radio"/>	<input type="radio"/>		<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

16C. Mechanical warewashing equipment sanitization food contact surfaces, equip., utensils

IN	OUT	N/O	N/A	COS	REPEAT
<input checked="" type="radio"/>	<input type="radio"/>		<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

17. Proper disposition of returned, previously served reconditions, & unsafe food

IN	OUT	N/O	N/A	COS	REPEAT
<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>

### Time/Temperature Control for Safety Food (TCS Food)

18A. Proper cooking time & temperatures

IN	OUT	N/O	N/A	COS	REPEAT
<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

18B. Whole meat cooking and serving, storing

IN	OUT	N/O	N/A	COS	REPEAT
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

18C. Microwave cooking of raw animal foods

IN	OUT	N/O	N/A	COS	REPEAT
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

*[Handwritten signature]*

Inspector

Acknowledged Receipt : Newton Public School

Page 2 of 5

## Food Establishment Inspection Report - FDA

Time/Temperature Control for Safety Food (TCS Food)	IN	OUT	N/O	N/A	COS	REPEAT
19. Proper reheating procedures for hot holding	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
20. Proper cooling time & temperatures	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
21. Proper hot holding temperatures	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
22. Proper cold holding temperatures	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
23. Proper Date Marking	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
23B. TCS Foods Disposition	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
24A. Time as a public health control: procedures	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
24B. Time as a public health control: temperatures & discarding food	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
24C. Time as a public health control: highly susceptible population (HSP)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

Consumer Advisory	IN	OUT	N/O	N/A	COS	REPEAT
25. Consumer advisory provided for raw or undercooked foods	<input type="radio"/>	<input type="radio"/>		<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

Highly Susceptible Populations (HSP)	IN	OUT	N/O	N/A	COS	REPEAT
26A. Pasteurized foods used; prohibited foods not offered	<input type="radio"/>	<input type="radio"/>		<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
26B. Reservice of foods	<input type="radio"/>	<input type="radio"/>		<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

Chemical	IN	OUT	N/O	N/A	COS	REPEAT *
27. Food additives: approved and properly used	<input type="radio"/>	<input type="radio"/>		<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
28A. Toxic substances identified, stored and used	<input checked="" type="radio"/>	<input type="radio"/>		<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
28B. Poisonous materials, sanitizers, additives, medicines restriction, separation, storage	<input checked="" type="radio"/>	<input type="radio"/>		<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
28C. Conditions of Use: law	<input checked="" type="radio"/>	<input type="radio"/>		<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

Conformance with Approved Procedures	IN	OUT	N/O	N/A	COS	REPEAT
29A. Compliance with variance, specialized process, & HACCP plan	<input type="radio"/>	<input type="radio"/>		<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
29B. Treating juice- HACCP, reduced oxygen packaging w/out variance, conformance with approved procedures	<input type="radio"/>	<input type="radio"/>		<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
29C. When HACCP plan is required	<input type="radio"/>	<input type="radio"/>		<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

### GOOD RETAIL PRACTICES

Good Retail Practices are preventative measures to control the addition of pathogens, chemicals, and physical objects into foods.

IN = In compliance    OUT = not in compliance    COS - corrected on -site during inspection    REPEAT = repeat violation

Safe Food and Water	IN	OUT	N/O	N/A	COS	REPEAT
30. Pasteurized eggs used where required	<input type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>
31A. Water & ice from approved source	<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>
31B. Sampling, alternative water supply	<input type="radio"/>	<input type="radio"/>		<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
31C. Sampling report	<input type="radio"/>	<input type="radio"/>		<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>



Inspector

Acknowledged Receipt : Newton Public School

Page 3 of 5

## Food Establishment Inspection Report - FDA

Safe Food and Water	IN	OUT	N/O	N/A	COS	REPEAT
---------------------	----	-----	-----	-----	-----	--------

32. Variance obtained for specialized processing methods

☐ IN ☐ OUT ☒ N/O ☐ N/A ☐ COS ☐ REPEAT

Food Temperature Control	IN	OUT	N/O	N/A	COS	REPEAT
--------------------------	----	-----	-----	-----	-----	--------

33A. Proper cooling methods used; adequate equipment for temperature control

☐ IN ☐ OUT ☐ N/O ☐ N/A ☐ COS ☐ REPEAT

33B. Frozen food

☐ IN ☐ OUT ☐ N/O ☐ N/A ☐ COS ☐ REPEAT

34. Plant food properly cooked for hot holding

☒ IN ☐ OUT ☐ N/O ☐ N/A ☐ COS ☐ REPEAT

35. Approved thawing methods used

☐ IN ☐ OUT ☐ N/O ☐ N/A ☐ COS ☐ REPEAT

36A. Thermometers provided and accurate

☒ IN ☐ OUT ☐ N/O ☐ N/A ☐ COS ☐ REPEAT

36B. Thermometers function properly

☒ IN ☐ OUT ☐ N/O ☐ N/A ☐ COS ☐ REPEAT

Food Identification	IN	OUT	COS	REPEAT
---------------------	----	-----	-----	--------

37A. Food properly labeled; original container

☒ IN ☐ OUT ☐ COS ☐ REPEAT

37B. Food labels, labeling of ingredients

☒ IN ☐ OUT ☐ COS ☐ REPEAT

Prevention of Food Contamination	IN	OUT	COS	REPEAT
----------------------------------	----	-----	-----	--------

38A. Insects, rodents, & animals not present

☒ IN ☐ OUT ☐ COS ☐ REPEAT

38B. Handling prohibition, controlling pests, prohibiting animals

☒ IN ☐ OUT ☐ COS ☐ REPEAT

39A. Contamination prevented during food storage

☒ IN ☐ OUT ☐ COS ☐ REPEAT

39B. Food display; ice used as an exterior coolant prohibited as an ingredient

☐ IN ☐ OUT ☐ COS ☐ REPEAT

39C. Consumer self-service operations- utensils and monitoring

☒ IN ☐ OUT ☐ COS ☐ REPEAT

40A. Personal cleanliness- prohibition jewelry

☒ IN ☐ OUT ☐ COS ☐ REPEAT

40B. Maintenance of fingernails

☒ IN ☐ OUT ☐ COS ☐ REPEAT

41. Wiping cloths; properly used and stored

☒ IN ☐ OUT ☐ COS ☐ REPEAT

42A. Washing Produce - following chemical manufacturers label

☐ IN ☐ OUT ☐ COS ☐ REPEAT

42B. Washing produce

☒ IN ☐ OUT ☐ COS ☐ REPEAT

42C. Washing produce- chemicals

☐ IN ☐ OUT ☐ COS ☐ REPEAT

Proper Use of Utensils	IN	OUT	COS	REPEAT
------------------------	----	-----	-----	--------

43. In-use utensils; properly stored

☒ IN ☐ OUT ☐ COS ☐ REPEAT

44. Utensils, equipment & linens; properly stored, dried, and handled

☒ IN ☐ OUT ☐ COS ☐ REPEAT

45A. Single-use/ single service articles properly stored and used, required

☒ IN ☐ OUT ☐ COS ☐ REPEAT

45B. Single-use/service articles use limitation, kitchenware and tableware preventing contamination

☒ IN ☐ OUT ☐ COS ☐ REPEAT

46. Gloves used properly

☒ IN ☐ OUT ☐ COS ☐ REPEAT

Utensils, Equipment and Vending	IN	OUT	COS	REPEAT
---------------------------------	----	-----	-----	--------

47A. Food & non-food contact surfaces cleanable

☒ IN ☐ OUT ☐ COS ☐ REPEAT

47B. Food contact surfaces /utensils cleanability, molluscan shellfish tanks, consumer self-service

☒ IN ☐ OUT ☐ COS ☐ REPEAT



Inspector

Acknowledged Receipt : Newton Public School

Page 4 of 5

## Food Establishment Inspection Report - FDA

### Utensils, Equipment and Vending

	IN	OUT	COS	REPEAT
47C. Properly designed characteristics: food and non-food contact surfaces, molluscan shellfish tanks	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
48A. Warewashing facilities: installed, maintained, & used; test strips	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
48B. Operational warewashing machines	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
49. Non-food contact surfaces clean	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

### Physical Facilities

	IN	OUT	N/A	COS	REPEAT
50. Hot & cold water available; adequate pressure	<input checked="" type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>
51A. Plumbing installed; proper backflow devices	<input checked="" type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>
51B. Prohibiting a cross-connection, inspection and servicing system	<input checked="" type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>
51C. Approved system and cleanable fixtures, service sink	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
52A. Sewage and waste water properly disposed	<input checked="" type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>
52B. Grease traps easily accessible for cleaning	<input checked="" type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>
52C. Removing mobile food establishment waste	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
53A. Toilet facilities; properly constructed, supplied, & cleaned	<input checked="" type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>
53B. Toilet tissue availability	<input checked="" type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>
54. Garbage & refuse properly disposed; facilities maintained	<input checked="" type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>
55A. Physical facilities installed, maintained, & clean	<input checked="" type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>
55B. Private homes and living or sleeping quarters, use prohibition	<input checked="" type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>
56. Adequate ventilation & lighting; designated areas used	<input checked="" type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>

### MASSACHUSETTS ONLY REGULATIONS

Rules and Regulations adopted for use in Massachusetts only.

#### Facilities

	IN	OUT	COS	REPEAT
57A. Catering	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
57B. When plans are reviewed, prerequisite for operations- valid permit	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
57C. Contents of plans and specifications, preoperational inspections	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
58. Mobile Food Operations	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
59. Temporary Food Establishments	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
60. Residential Kitchens	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

#### Procedures

	IN	OUT	COS	REPEAT
61. Anti-choking Procedures	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
62. Tobacco Products: Notice and Sale	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
63. Food Allergy Awareness Requirements	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>



Inspector

Acknowledged Receipt : Newton Public School

Page 5 of 5



**City of Newton**  
**Health and Human Services**  
 Deborah Youngblood, PhD, Commissioner  
 1000 Commonwealth Ave Newton, MA 02459  
 (617) 796-1420



**Public Health**  
 Prevent. Promote. Protect.

**Food Establishment Inspection Report - FDA**

**Insp Date:** 10/4/2018      **Business ID:** 1N2390  
**Business:** Williams School  
 141 Grove St.  
  
 Newton, MA 02466

**Inspection:** 6N000050  
**Section:** 3  
**Phone:** 617-559-6480  
**Inspector:** 1N11123 Nicola Assan  
**Reason:** 1-Routine  
**Results:** No Follow-up R2

**Inspection Summary**

Official Order for Correction: Based on an inspection today, the items checked indicate violations of 105 CMR 590.000/ 2013 Federal Food Code. This report, when signed below by the Commissioner of Health / Agent constitutes an order by the Commissioner of Health. Failure to correct violations cited in this report may result in suspension or revocation of the food establishment permit and cessation of food establishment operations. If aggrieved by this order, you have the right to a hearing. The request must be in writing and submitted to the Commissioner of Health at the above address within 10 days of receipt of this order.

Est. Type 1 - Food Svc Establis License/Permit # \_\_\_\_\_ Risk Category 02 Risk Level Observed 02 Low

Foodborne Illness Complaint Investigated (All) ☐ Involving More Than Two Persons ☐

**FOODBORNE ILLNESS RISK FACTORS AND PUBLIC HEALTH INTERVENTIONS**

Compliance status: IN = in compliance OUT = not in compliance N/O = not observed N/A = not applicable

Marked in appropriate box for COS and/or R. COS = corrected on-site during inspection R = repeat violation

Risk factors are improper practices or procedures identified as the most prevalent contributing factors of foodborne illness or injury. Public Health Interventions are control measures to prevent foodborne illnesses or injury.

**Supervision**

1. PIC Present, Knowledge and Duties
2. Certified Food Protection Manager

IN OUT N/O N/A COS REPEAT

○ ○      □ □  
 ○ ○      ○ □ □

***This item has Notes. See Footnote 1 at end of questionnaire.***

**Employee Health / Responding to Contamination Events**

- 3A. Employee Health: PIC Knowledge, Responsibilities & Reporting
- 3B. Employee Reporting to PIC
4. Proper Use of Restriction & Exclusion
5. Clean-up of Vomiting and Diarrheal Events

IN OUT N/O N/A COS REPEAT

⊙ ○      □ □  
 ⊙ ○      □ □  
 ⊙ ○      □ □  
 ⊙ ○      □ □

**Good Hygienic Practices**

- 6A. Proper eating, tasting, drinking, or tobacco use
- 6B. Preventing contamination when tasting

IN OUT N/O N/A COS REPEAT

⊙ ○ ○      □ □  
 ⊙ ○ ○      □ □

*Assan*

Inspector

Acknowledged Receipt : Tim Viveiros

Page 1 of 7

## Food Establishment Inspection Report - FDA

### Good Hygienic Practices

7. No discharge from eyes, nose, and mouth

IN	OUT	N/O	N/A	COS	REPEAT
<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>

### Control of Hands as a Vehicle of Contamination

8A. Hands clean & properly washed

IN	OUT	N/O	N/A	COS	REPEAT
<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>

8B. Where to wash, hand antiseptics

IN	OUT	N/O	N/A	COS	REPEAT
<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>

9. No bare hand contact with RTE food or a pre-approved alternative procedure properly allowed

IN	OUT	N/O	N/A	COS	REPEAT
<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

10A. Adequate handwashing sinks properly supplied and accessible

IN	OUT	N/O	N/A	COS	REPEAT
<input type="radio"/>	<input checked="" type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>

#### Fail Notes

6-301.11

*Handwashing Cleanser, Availability  
[There was no soap in the soap dispenser. Each handwashing sink or group of adjacent handwashing sinks shall be provided with a supply of hand cleaning liquid (soap). You need to refill the soap dispenser and ensure that it is supplied with soap at all times.]*

10B. Handwashing sinks accessible with proper signage, handwashing aids

IN	OUT	N/O	N/A	COS	REPEAT
<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>

### Approved Sources

11A. Milk, eggs, juice, bottled water, hermetically sealed food, game animals

IN	OUT	N/O	N/A	COS	REPEAT
<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

11B. Packaged foods, labeling, whole muscle beef

IN	OUT	N/O	N/A	COS	REPEAT
<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

11C. Obtaining raw fish, packaged meat & poultry, eggs

IN	OUT	N/O	N/A	COS	REPEAT
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

12A. Food received at proper temperature

IN	OUT	N/O	N/A	COS	REPEAT
<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

12B. Shipping and receiving frozen food

IN	OUT	N/O	N/A	COS	REPEAT
<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

13. Food in good condition, honestly presented, safe, & unadulterated

IN	OUT	N/O	N/A	COS	REPEAT
<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>

13B. Food package integrity

IN	OUT	N/O	N/A	COS	REPEAT
<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>

14A. Required records available: shellstock tags, parasite destruction

IN	OUT	N/O	N/A	COS	REPEAT
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

14B. Missing shellstock tags, destruction

IN	OUT	N/O	N/A	COS	REPEAT
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

14C. Parasite destruction- storing raw/partially cooked fish

IN	OUT	N/O	N/A	COS	REPEAT
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

### Protection from Contamination

15A. Food separated & protected

IN	OUT	N/O	N/A	COS	REPEAT
<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

15B. Cleaning equip/utensils/food containers

IN	OUT	N/O	N/A	COS	REPEAT
<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

16A. Food-contact surfaces: cleaned & sanitized immersion 171° F and above

IN	OUT	N/O	N/A	COS	REPEAT
<input checked="" type="radio"/>	<input type="radio"/>		<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

16B. Food contact surfaces cleaned and sanitized NMT 194° F, NLT 180° F

IN	OUT	N/O	N/A	COS	REPEAT
<input checked="" type="radio"/>	<input type="radio"/>		<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

16C. Mechanical warewashing equipment sanitization food contact surfaces, equip., utensils

IN	OUT	N/O	N/A	COS	REPEAT
<input type="radio"/>	<input type="radio"/>		<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

17. Proper disposition of returned, previously served reconditions, & unsafe food

IN	OUT	N/O	N/A	COS	REPEAT
<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>

### Time/Temperature Control for Safety Food (TCS Food)

18A. Proper cooking time & temperatures

IN	OUT	N/O	N/A	COS	REPEAT
<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

18B. Whole meat cooking and serving, storing

IN	OUT	N/O	N/A	COS	REPEAT
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

18C. Microwave cooking of raw animal foods

IN	OUT	N/O	N/A	COS	REPEAT
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>



Inspector

Acknowledged Receipt : Tim Viveiros

Page 2 of 7

## Food Establishment Inspection Report - FDA

Time/Temperature Control for Safety Food (TCS Food)		IN	OUT	N/O	N/A	COS	REPEAT
19. Proper reheating procedures for hot holding		<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
20. Proper cooling time & temperatures		<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
21. Proper hot holding temperatures		<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
<i>Fail Notes</i>	3-501.16 (A) *Hot TCS foods Maintained at or Above 135oF, Also for whole meat roasts (130F and above) [The temperature of the macaroni cheese in the hot holding unit was 127.4 degrees fahrenheit. You must ensure that the temperature of foods for hot holding be maintained at or above 135 degrees fahrenheit.]						
22. Proper cold holding temperatures		<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
<i>Fail Notes</i>	3-501.16(A2 &B) *Cold PHFs Maintained at or Below 41oF- also pertains to untreated eggs (45F) [The temperature of food items in the refrigerator ranged from 42.8 to 44.3 degrees fahrenheit. Maintain the internal temperature of TCS foods at 41 degrees fahrenheit or below.]						
23. Proper Date Marking		<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
23B. TCS Foods Disposition		<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
24A. Time as a public health control: procedures		<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
24B. Time as a public health control: temperatures & discarding food		<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
24C. Time as a public health control: highly susceptible population (HSP)		<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
Consumer Advisory		IN	OUT	N/O	N/A	COS	REPEAT
25. Consumer advisory provided for raw or undercooked foods		<input type="radio"/>	<input type="radio"/>		<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
Highly Susceptible Populations (HSP)		IN	OUT	N/O	N/A	COS	REPEAT
26A. Pasteurized foods used; prohibited foods not offered		<input type="radio"/>	<input type="radio"/>		<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
26B. Reservice of foods		<input type="radio"/>	<input type="radio"/>		<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
Chemical		IN	OUT	N/O	N/A	COS	REPEAT
27. Food additives: approved and properly used		<input type="radio"/>	<input type="radio"/>		<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
28A. Toxic substances identified, stored and used		<input checked="" type="radio"/>	<input type="radio"/>		<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
28B. Poisonous materials, sanitizers, additives, medicines restriction, separation, storage		<input checked="" type="radio"/>	<input type="radio"/>		<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
28C. Conditions of Use: law		<input checked="" type="radio"/>	<input type="radio"/>		<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
Conformance with Approved Procedures		IN	OUT	N/O	N/A	COS	REPEAT
29A. Compliance with variance, specialized process, & HACCP plan		<input type="radio"/>	<input type="radio"/>		<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
29B. Treating juice- HACCP, reduced oxygen packaging w/out variance, conformance with approved procedures		<input type="radio"/>	<input type="radio"/>		<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
29C. When HACCP plan is required		<input type="radio"/>	<input type="radio"/>		<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>



Inspector

Acknowledged Receipt : Tim Viveiros

Page 3 of 7

## Food Establishment Inspection Report - FDA

### GOOD RETAIL PRACTICES

Good Retail Practices are preventative measures to control the addition of pathogens, chemicals, and physical objects into foods.

IN = In compliance OUT = not in compliance COS = corrected on -site during inspection REPEAT = repeat violation

#### Safe Food and Water

	IN	OUT	N/O	N/A	COS	REPEAT
30. Pasteurized eggs used where required	<input type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>
31A. Water & ice from approved source	<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>
31B. Sampling, alternative water supply	<input type="radio"/>	<input type="radio"/>		<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
31C. Sampling report	<input type="radio"/>	<input type="radio"/>		<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
32. Variance obtained for specialized processing methods	<input type="radio"/>	<input type="radio"/>		<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

#### Food Temperature Control

	IN	OUT	N/O	N/A	COS	REPEAT
33A. Proper cooling methods used; adequate equipment for temperature control	<input type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>
33B. Frozen food	<input type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>
34. Plant food properly cooked for hot holding	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
35. Approved thawing methods used	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
36A. Thermometers provided and accurate	<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>
36B. Thermometers function properly	<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>

#### Food Identification

	IN	OUT	COS	REPEAT
37A. Food properly labeled; original container		<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
37B. Food labels, labeling of ingredients		<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

#### Prevention of Food Contamination

	IN	OUT	COS	REPEAT
38A. Insects, rodents, & animals not present		<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
38B. Handling prohibition, controlling pests, prohibiting animals		<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
39A. Contamination prevented during food storage		<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
39B. Food display; ice used as an exterior coolant prohibited as an ingredient		<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
39C. Consumer self-service operations- utensils and monitoring		<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
40A. Personal cleanliness- prohibition jewelry		<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
40B. Maintenance of fingernails		<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
41. Wiping cloths; properly used and stored		<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
42A. Washing Produce - following chemical manufacturers label		<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
42B. Washing produce		<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
42C. Washing produce- chemicals		<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

#### Proper Use of Utensils

	IN	OUT	COS	REPEAT
43. In-use utensils; properly stored	<input type="radio"/>	<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>



Inspector

Acknowledged Receipt : Tim Viveiros

Page 4 of 7

# Food Establishment Inspection Report - FDA

## Proper Use of Utensils

IN OUT COS REPEAT

Fail Notes 3-304.12

### In-Use Utensils, Between-Use Storage

[A food ladle was observed being stored on a paper towel on the food preparation table. During pauses in food preparation, store the utensils in one of the following approved manners: 1) In the food with the handle above the top of the food and container, or in equipment that can be closed such as bins of sugar etc., or 2) On a clean portion of the food preparation table or cooking equipment only if the equipment is cleaned and sanitized every four hours, or 3) In running water of sufficient velocity to flush particulates to the drain, or 4) In a container of water if the water is maintained at 135 degrees fahrenheit and above. Do not use ice water. Do not store knives wedged between equipment. Avoid using containers and equipment without handles. Use utensils with handles instead. Once a food employee begins to use a utensil such as a ladle, spatula and knife, that has been previously cleaned and sanitized, it is considered an in-use utensil. In-use utensils used on a continuous or intermittent basis during preparation or dispensing, must be cleaned and sanitized on a schedule that precludes the growth of pathogens that may have been introduced onto utensil surfaces. In-use utensils may be safely stored in hot water maintained at 135 degrees fahrenheit or above during intermittent use because microbial growth is controlled at such temperatures.]

44. Utensils, equipment & linens; properly stored, dried, and handled

☒ ☐ ☐ ☐

45A. Single-use/ single service articles properly stored and used, required

☒ ☐ ☐ ☐

45B. Single-use/service articles use limitation, kitchenware and tableware preventing contamination

☒ ☐ ☐ ☐

46. Gloves used properly

☒ ☐ ☐ ☐

## Utensils, Equipment and Vending

IN OUT COS REPEAT

47A. Food & non-food contact surfaces cleanable

☒ ☐ ☐ ☐

47B. Food contact surfaces /utensils cleanability, molluscan shellfish tanks, consumer self-service

☒ ☐ ☐ ☐

47C. Properly designed characteristics: food and non-food contact surfaces, molluscan shellfish tanks

☒ ☐ ☐ ☐

48A. Warewashing facilities: installed, maintained, & used; test strips

☐ ☒ ☐ ☐

Fail Notes 4-302.14

### Sanitizing Solutions, Testing Devices

[There were no testing devices to check the concentration of sanitizing solutions. A test kit or other device shall be provided to accurately measure the concentration of the sanitizing solution.]

4-501.19

### Manual warewashing equipment, wash solution temperature

[The temperature of the wash solution in the 3 bay compartment sink measured 81.1 degrees fahrenheit. The temperature of the wash solution in manual warewashing equipment shall be maintained at not less than 110 degrees fahrenheit (43 degrees celsius) or the temperature specified on the cleaning agent manufacturer's label instructions.]

48B. Operational warewashing machines

☐ ☐ ☐ ☐

49. Non-food contact surfaces clean

☐ ☒ ☐ ☐



Inspector

Acknowledged Receipt : Tim Viveiros

Page 5 of 7

## Food Establishment Inspection Report - FDA

### Utensils, Equipment and Vending

IN OUT COS REPEAT

Fail Notes 4-601.11 (B&C) \*Equipment, Food-Contact Surfaces, Nonfood-Contact Surfaces, and Utensils  
[The gaskets of the refrigerator were dirty. Non-food contact surfaces and equipment shall be cleaned at a frequency to preclude accumulation of soil residues.]

### Physical Facilities

IN OUT N/A COS REPEAT

50. Hot & cold water available; adequate pressure	<input checked="" type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>
51A. Plumbing installed; proper backflow devices	<input checked="" type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>
51B. Prohibiting a cross-connection, inspection and servicing system	<input type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>
51C. Approved system and cleanable fixtures, service sink	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
52A. Sewage and waste water properly disposed	<input checked="" type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>
52B. Grease traps easily accessible for cleaning	<input checked="" type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>
52C. Removing mobile food establishment waste	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
53A. Toilet facilities; properly constructed, supplied, & cleaned	<input checked="" type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>
53B. Toilet tissue availability	<input checked="" type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>
54. Garbage & refuse properly disposed; facilities maintained	<input checked="" type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>
55A. Physical facilities installed, maintained, & clean	<input checked="" type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>
55B. Private homes and living or sleeping quarters, use prohibition	<input checked="" type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>
56. Adequate ventilation & lighting; designated areas used	<input checked="" type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>

### MASSACHUSETTS ONLY REGULATIONS

Rules and Regulations adopted for use in Massachusetts only.

### Facilities

IN OUT COS REPEAT

57A. Catering	<input type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>
57B. When plans are reviewed, prerequisite for operations- valid permit	<input type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>
57C. Contents of plans and specifications, preoperational inspections	<input type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>
58. Mobile Food Operations	<input type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>
59. Temporary Food Establishments	<input type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>
60. Residential Kitchens	<input type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>

### Procedures

IN OUT COS REPEAT

61. Anti-choking Procedures	<input type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>
62. Tobacco Products: Notice and Sale	<input type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>
63. Food Allergy Awareness Requirements	<input type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>



Inspector

Acknowledged Receipt : Tim Viveiros

Page 6 of 7

## Food Establishment Inspection Report - FDA

### Footnote 1

#### **Notes:**

At the time of the inspection an intern was working in the kitchen. She informed me that the PIC had left and Sodexo are looking to appoint another person.



Inspector

Acknowledged Receipt : Tim Viveiros

Page 7 of 7



**City of Newton**  
**Health and Human Services**  
 Deborah Youngblood, PhD, Commissioner  
 1000 Commonwealth Ave Newton, MA 02459  
 (617) 796-1420



**Public Health**  
 Prevent. Promote. Protect.

**Food Establishment Inspection Report - FDA**

**Insp Date:** 5/2/2019  
**Business:** Williams School  
 141 Grove St.

**Business ID:** 1N2390

Newton, MA 02466

**Inspection:** 6N000111  
**Section:** 3  
**Phone:** 617-559-6480  
**Inspector:** 1N11123 Nicola Assan  
**Reason:** 1-Routine  
**Results:** No Follow-up R2

**Inspection Summary**

Official Order for Correction: Based on an inspection today, the items checked indicate violations of 105 CMR 590.000/ 2013 Federal Food Code. This report, when signed below by the Commissioner of Health / Agent constitutes an order by the Commissioner of Health. Failure to correct violations cited in this report may result in suspension or revocation of the food establishment permit and cessation of food establishment operations. If aggrieved by this order, you have the right to a hearing. The request must be in writing and submitted to the Commissioner of Health at the above address within 10 days of receipt of this order.

Est. Type 1 - Food Svc Establis License/Permit # \_\_\_\_\_ Risk Category 02 Risk Level Observed 02 Low

Foodborne Illness Complaint Investigated (All) ☐ Involving More Than Two Persons ☐

**FOODBORNE ILLNESS RISK FACTORS AND PUBLIC HEALTH INTERVENTIONS**

Compliance status: IN = in compliance OUT = not in compliance N/O = not observed N/A = not applicable

Marked in appropriate box for COS and/or R. COS = corrected on-site during inspection R = repeat violation

Risk factors are improper practices or procedures identified as the most prevalent contributing factors of foodborne illness or injury. Public Health Interventions are control measures to prevent foodborne illnesses or injury.

**Supervision**

1. PIC Present, Knowledge and Duties

IN	OUT	N/O	N/A	COS	REPEAT
⊙	○			□	□

2. Certified Food Protection Manager

⊙	○		○	□	□
---	---	--	---	---	---

**Employee Health / Responding to Contamination Events**

3A. Employee Health: PIC Knowledge, Responsibilities & Reporting

IN	OUT	N/O	N/A	COS	REPEAT
⊙	○			□	□

3B. Employee Reporting to PIC

⊙	○			□	□
---	---	--	--	---	---

4. Proper Use of Restriction & Exclusion

⊙	○			□	□
---	---	--	--	---	---

5. Clean-up of Vomiting and Diarrheal Events

⊙	○			□	□
---	---	--	--	---	---

**Good Hygienic Practices**

6A. Proper eating, tasting, drinking, or tobacco use

IN	OUT	N/O	N/A	COS	REPEAT
⊙	○	○		□	□

6B. Preventing contamination when tasting

⊙	○	○		□	□
---	---	---	--	---	---

Inspector

Acknowledged Receipt : Tim Viveiros

Page 1 of 5

## Food Establishment Inspection Report - FDA

### Good Hygienic Practices

7. No discharge from eyes, nose, and mouth

IN	OUT	N/O	N/A	COS	REPEAT
<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>

### Control of Hands as a Vehicle of Contamination

8A. Hands clean & properly washed

IN	OUT	N/O	N/A	COS	REPEAT
<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>

8B. Where to wash, hand antiseptics

IN	OUT	N/O	N/A	COS	REPEAT
<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>

9. No bare hand contact with RTE food or a pre-approved alternative procedure properly allowed

IN	OUT	N/O	N/A	COS	REPEAT
<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

10A. Adequate handwashing sinks properly supplied and accessible

IN	OUT	N/O	N/A	COS	REPEAT
<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>

10B. Handwashing sinks accessible with proper signage, handwashing aids

IN	OUT	N/O	N/A	COS	REPEAT
<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>

### Approved Sources

11A. Milk, eggs, juice, bottled water, hermetically sealed food, game animals

IN	OUT	N/O	N/A	COS	REPEAT
<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

11B. Packaged foods, labeling, whole muscle beef

IN	OUT	N/O	N/A	COS	REPEAT
<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

11C. Obtaining raw fish, packaged meat & poultry, eggs

IN	OUT	N/O	N/A	COS	REPEAT
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

12A. Food received at proper temperature

IN	OUT	N/O	N/A	COS	REPEAT
<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

12B. Shipping and receiving frozen food

IN	OUT	N/O	N/A	COS	REPEAT
<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

13. Food in good condition, honestly presented, safe, & unadulterated

IN	OUT	N/O	N/A	COS	REPEAT
<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>

13B. Food package integrity

IN	OUT	N/O	N/A	COS	REPEAT
<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>

14A. Required records available: shellstock tags, parasite destruction

IN	OUT	N/O	N/A	COS	REPEAT
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

14B. Missing shellstock tags, destruction

IN	OUT	N/O	N/A	COS	REPEAT
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

14C. Parasite destruction- storing raw/partially cooked fish

IN	OUT	N/O	N/A	COS	REPEAT
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

### Protection from Contamination

15A. Food separated & protected

IN	OUT	N/O	N/A	COS	REPEAT
<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

15B. Cleaning equip/utensils/food containers

IN	OUT	N/O	N/A	COS	REPEAT
<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

16A. Food-contact surfaces: cleaned & sanitized immersion 171° F and above

IN	OUT	N/O	N/A	COS	REPEAT
<input type="radio"/>	<input checked="" type="radio"/>		<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

Fail Notes 4-501.114 (A-E, F 1&2)

*Chemical Sanitization - Temperature, pH, Concentration and Hardness  
[The concentration of the sanitizing solution in the 3 bay sink was too strong (>500ppm). A quaternary compound solution shall have a concentration (and temperature) specified on the manufacturer's label instructions: 150-400ppm and temperature between 65 and 75 degrees F.]*

16B. Food contact surfaces cleaned and sanitized NMT 194° F, NLT 180° F

IN	OUT	N/O	N/A	COS	REPEAT
<input checked="" type="radio"/>	<input type="radio"/>		<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

16C. Mechanical warewashing equipment sanitization food contact surfaces, equip., utensils

IN	OUT	N/O	N/A	COS	REPEAT
<input checked="" type="radio"/>	<input type="radio"/>		<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

17. Proper disposition of returned, previously served reconditions, & unsafe food

IN	OUT	N/O	N/A	COS	REPEAT
<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>

### Time/Temperature Control for Safety Food (TCS Food)

18A. Proper cooking time & temperatures

IN	OUT	N/O	N/A	COS	REPEAT
<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

*M. S. S. M.*

Inspector

Acknowledged Receipt : Tim Viveiros

Page 2 of 5

## Food Establishment Inspection Report - FDA

### Time/Temperature Control for Safety Food (TCS Food)

	IN	OUT	N/O	N/A	COS	REPEAT
18B. Whole meat cooking and serving, storing	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
18C. Microwave cooking of raw animal foods	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
19. Proper reheating procedures for hot holding	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
20. Proper cooling time & temperatures	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
21. Proper hot holding temperatures	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
22. Proper cold holding temperatures	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
23. Proper Date Marking	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
23B. TCS Foods Disposition	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
24A. Time as a public health control: procedures	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
24B. Time as a public health control: temperatures & discarding food	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
24C. Time as a public health control: highly susceptible population (HSP)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

### Consumer Advisory

	IN	OUT	N/O	N/A	COS	REPEAT
25. Consumer advisory provided for raw or undercooked foods	<input type="radio"/>	<input type="radio"/>		<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

### Highly Susceptible Populations (HSP)

	IN	OUT	N/O	N/A	COS	REPEAT
26A. Pasteurized foods used; prohibited foods not offered	<input type="radio"/>	<input type="radio"/>		<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
26B. Reservice of foods	<input type="radio"/>	<input type="radio"/>		<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

### Chemical

	IN	OUT	N/O	N/A	COS	REPEAT
27. Food additives: approved and properly used	<input type="radio"/>	<input type="radio"/>		<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
28A. Toxic substances identified, stored and used	<input checked="" type="radio"/>	<input type="radio"/>		<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
28B. Poisonous materials, sanitizers, additives, medicines restriction, separation, storage	<input checked="" type="radio"/>	<input type="radio"/>		<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
28C. Conditions of Use: law	<input checked="" type="radio"/>	<input type="radio"/>		<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

### Conformance with Approved Procedures

	IN	OUT	N/O	N/A	COS	REPEAT
29A. Compliance with variance, specialized process, & HACCP plan	<input type="radio"/>	<input type="radio"/>		<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
29B. Treating juice- HACCP, reduced oxygen packaging w/out variance, conformance with approved procedures	<input type="radio"/>	<input type="radio"/>		<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
29C. When HACCP plan is required	<input type="radio"/>	<input type="radio"/>		<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

### GOOD RETAIL PRACTICES

Good Retail Practices are preventative measures to control the addition of pathogens, chemicals, and physical objects into foods.

IN = In compliance    OUT = not in compliance    COS - corrected on -site during inspection    REPEAT = repeat violation

### Safe Food and Water

	IN	OUT	N/O	N/A	COS	REPEAT
30. Pasteurized eggs used where required	<input type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>
31A. Water & ice from approved source	<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>

Inspector

Acknowledged Receipt : Tim Viveiros

Page 3 of 5

## Food Establishment Inspection Report - FDA

### Safe Food and Water

	IN	OUT	N/O	N/A	COS	REPEAT
31B. Sampling, alternative water supply	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>	
31C. Sampling report	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>	
32. Variance obtained for specialized processing methods	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>	

### Food Temperature Control

	IN	OUT	N/O	N/A	COS	REPEAT
33A. Proper cooling methods used; adequate equipment for temperature control	<input type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>
33B. Frozen food	<input type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>
34. Plant food properly cooked for hot holding	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
35. Approved thawing methods used	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
36A. Thermometers provided and accurate	<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>
36B. Thermometers function properly	<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>

### Food Identification

	IN	OUT	COS	REPEAT
37A. Food properly labeled; original container	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
37B. Food labels, labeling of ingredients	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

### Prevention of Food Contamination

	IN	OUT	COS	REPEAT
38A. Insects, rodents, & animals not present	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
38B. Handling prohibition, controlling pests, prohibiting animals	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
39A. Contamination prevented during food storage	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
39B. Food display; ice used as an exterior coolant prohibited as an ingredient	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
39C. Consumer self-service operations- utensils and monitoring	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
40A. Personal cleanliness- prohibition jewelry	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
40B. Maintenance of fingernails	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
41. Wiping cloths; properly used and stored	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
42A. Washing Produce - following chemical manufacturers label	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
42B. Washing produce	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
42C. Washing produce- chemicals	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

### Proper Use of Utensils

	IN	OUT	COS	REPEAT
43. In-use utensils; properly stored	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
44. Utensils, equipment & linens; properly stored, dried, and handled	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
45A. Single-use/ single service articles properly stored and used, required	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
45B. Single-use/service articles use limitation, kitchenware and tableware preventing contamination	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
46. Gloves used properly	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

### Utensils, Equipment and Vending

	IN	OUT	COS	REPEAT
47A. Food & non-food contact surfaces cleanable	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

*Assom*

Inspector

Acknowledged Receipt : Tim Viveiros

Page 4 of 5

## Food Establishment Inspection Report - FDA

### Utensils, Equipment and Vending

	IN	OUT	COS	REPEAT
47B. Food contact surfaces /utensils cleanability, molluscan shellfish tanks, consumer self-service	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
47C. Properly designed characteristics: food and non-food contact surfaces, molluscan shellfish tanks	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
48A. Warewashing facilities: installed, maintained, & used; test strips	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
48B. Operational warewashing machines	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
49. Non-food contact surfaces clean	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

### Physical Facilities

	IN	OUT	N/A	COS	REPEAT
50. Hot & cold water available; adequate pressure	<input checked="" type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>
51A. Plumbing installed; proper backflow devices	<input checked="" type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>
51B. Prohibiting a cross-connection, inspection and servicing system	<input checked="" type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>
51C. Approved system and cleanable fixtures, service sink	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
52A. Sewage and waste water properly disposed	<input checked="" type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>
52B. Grease traps easily accessible for cleaning	<input checked="" type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>
52C. Removing mobile food establishment waste	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
53A. Toilet facilities; properly constructed, supplied, & cleaned	<input checked="" type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>
53B. Toilet tissue availability	<input checked="" type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>
54. Garbage & refuse properly disposed; facilities maintained	<input checked="" type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>
55A. Physical facilities installed, maintained, & clean	<input checked="" type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>
55B. Private homes and living or sleeping quarters, use prohibition	<input checked="" type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>
56. Adequate ventilation & lighting; designated areas used	<input checked="" type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>

### MASSACHUSETTS ONLY REGULATIONS

Rules and Regulations adopted for use in Massachusetts only.

#### Facilities

	IN	OUT	COS	REPEAT
57A. Catering	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
57B. When plans are reviewed, prerequisite for operations- valid permit	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
57C. Contents of plans and specifications, preoperational inspections	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
58. Mobile Food Operations	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
59. Temporary Food Establishments	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
60. Residential Kitchens	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

#### Procedures

	IN	OUT	COS	REPEAT
61. Anti-choking Procedures	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
62. Tobacco Products: Notice and Sale	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
63. Food Allergy Awareness Requirements	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

*Assom*

Inspector

Acknowledged Receipt : Tim Viveiros

Page 5 of 5



City of Newton  
Health and Human Services  
Deborah Youngblood, PhD, Commissioner  
1000 Commonwealth Ave Newton, MA 02459  
(617) 796-1420



Public Health  
Prevent, Promote, Protect

Food Establishment Inspection Report - FDA

Insp Date: 6/29/2017 Business ID: 1N2393

Business: Zervas School  
30 Beethoven Ave.

Newton, MA 02468

Inspection: 4N000390

Section: 3

Phone: 617-559-6750

Inspector: 1N11122 Shanene Pierce

Reason: 4-Pre-operational

Results: No Follow-up R2

Inspection Summary

Official Order for Correction: Based on an inspection today, the items checked indicate violations of 105 CMR 590.000/ 2013 Federal Food Code. This report, when signed below by the Commissioner of Health / Agent constitutes an order by the Commissioner of Health. Failure to correct violations cited in this report may result in suspension or revocation of the food establishment permit and cessation of food establishment operations. If aggrieved by this order, you have the right to a hearing. The request must be in writing and submitted to the Commissioner of Health at the above address within 10 days of receipt of this order.

Est. Type 1 - Food Svc Establis License/Permit # \_\_\_\_\_ Risk Category 02 Risk Level Observed 02 Low

Foodborne Illness Complaint Investigated (All) ☐ Involving More Than Two Persons ☐

FOODBORNE ILLNESS RISK FACTORS AND PUBLIC HEALTH INTERVENTIONS

Compliance status: IN = in compliance OUT = not in compliance N/O = not observed N/A = not applicable

Marked in appropriate box for COS and/or R. COS = corrected on-site during inspection R = repeat violation

Risk factors are improper practices or procedures identified as the most prevalent contributing factors of foodborne illness or injury. Public Health Interventions are control measures to prevent foodborne illnesses or injury.

Supervision

1. PIC Present, Knowledge and Duties

IN OUT N/O N/A COS REPEAT

☒ ☐ ☐ ☐ ☐ ☐

2. Certified Food Protection Manager

☐ ☒ ☐ ☐ ☒ ☐

Fail Notes 2-102.12 (A) *Certified food protection manager  
[Person who will be in charge of the kitchen during the  
school year was not present. Please have person in  
charge receive certified food protection manager  
certificate.]*

Employee Health / Responding to Contamination Events

3A. Employee Health: PIC Knowledge, Responsibilities & Reporting

IN OUT N/O N/A COS REPEAT

☒ ☐ ☐ ☐ ☐ ☐

3B. Employee Reporting to PIC

☐ ☒ ☐ ☐ ☐ ☐

Fail Notes 2-201.11 (A&C) *\*Responsibility of Permit Holder, Person in Charge,  
and Conditional Employees-Responsibility of the PIC  
to Exclude or Restrict  
[Need to see employee health policy.]*

*Shanene Pierce*

Inspector

Acknowledged Receipt : Rachel Oppenheimer

Page 1 of 6

## Food Establishment Inspection Report - FDA

### Employee Health / Responding to Contamination Events

- |  | IN                               | OUT                              | N/O | N/A | COS                                 | REPEAT                   |
|--|----------------------------------|----------------------------------|-----|-----|-------------------------------------|--------------------------|
| 4. Proper Use of Restriction & Exclusion     | <input checked="" type="radio"/> | <input type="radio"/>            |     |     | <input type="checkbox"/>            | <input type="checkbox"/> |
| 5. Clean-up of Vomiting and Diarrheal Events | <input type="radio"/>            | <input checked="" type="radio"/> |     |     | <input checked="" type="checkbox"/> | <input type="checkbox"/> |

*Fail Notes*    2-501.11    *Procedures involving clean-up of vomit and diarrhea [Through discussion it was determined that custodians are responsible for the clean up procedures for vomit and diarrhea events.]*

### Good Hygienic Practices

- |  | IN                    | OUT                   | N/O                              | N/A | COS                      | REPEAT                   |
|--|-----------------------|-----------------------|----------------------------------|-----|--------------------------|--------------------------|
| 6A. Proper eating, tasting, drinking, or tobacco use | <input type="radio"/> | <input type="radio"/> | <input checked="" type="radio"/> |     | <input type="checkbox"/> | <input type="checkbox"/> |
| 6B. Preventing contamination when tasting            | <input type="radio"/> | <input type="radio"/> | <input checked="" type="radio"/> |     | <input type="checkbox"/> | <input type="checkbox"/> |
| 7. No discharge from eyes, nose, and mouth           | <input type="radio"/> | <input type="radio"/> | <input checked="" type="radio"/> |     | <input type="checkbox"/> | <input type="checkbox"/> |

### Control of Hands as a Vehicle of Contamination

- |  | IN                               | OUT                              | N/O                              | N/A                   | COS                      | REPEAT                   |
|--|----------------------------------|----------------------------------|----------------------------------|-----------------------|--------------------------|--------------------------|
| 8A. Hands clean & properly washed  | <input type="radio"/>            | <input type="radio"/>            | <input checked="" type="radio"/> |                       | <input type="checkbox"/> | <input type="checkbox"/> |
| 8B. Where to wash, hand antiseptics  | <input checked="" type="radio"/> | <input type="radio"/>            | <input type="radio"/>            |                       | <input type="checkbox"/> | <input type="checkbox"/> |
| 9. No bare hand contact with RTE food or a pre-approved alternative procedure properly allowed | <input type="radio"/>            | <input type="radio"/>            | <input checked="" type="radio"/> | <input type="radio"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 10A. Adequate handwashing sinks properly supplied and accessible                               | <input checked="" type="radio"/> | <input type="radio"/>            |                                  |                       | <input type="checkbox"/> | <input type="checkbox"/> |
| 10B. Handwashing sinks accessible with proper signage, handwashing aids                        | <input type="radio"/>            | <input checked="" type="radio"/> |                                  |                       | <input type="checkbox"/> | <input type="checkbox"/> |

*Fail Notes*    6-301.14    *Handwashing signage [Please have all facilities supplied with appropriate signage and other visual aids.]*

### Approved Sources

- |   | IN                    | OUT                   | N/O                              | N/A                              | COS                      | REPEAT                   |
|---|-----------------------|-----------------------|----------------------------------|----------------------------------|--------------------------|--------------------------|
| 11A. Milk, eggs, juice, bottled water, hermetically sealed food, game animals | <input type="radio"/> | <input type="radio"/> | <input checked="" type="radio"/> | <input type="radio"/>            | <input type="checkbox"/> | <input type="checkbox"/> |
| 11B. Packaged foods, labeling, whole muscle beef                              | <input type="radio"/> | <input type="radio"/> | <input checked="" type="radio"/> | <input type="radio"/>            | <input type="checkbox"/> | <input type="checkbox"/> |
| 11C. Obtaining raw fish, packaged meat & poultry, eggs                        | <input type="radio"/> | <input type="radio"/> | <input checked="" type="radio"/> | <input type="radio"/>            | <input type="checkbox"/> | <input type="checkbox"/> |
| 12A. Food received at proper temperature                                      | <input type="radio"/> | <input type="radio"/> | <input checked="" type="radio"/> | <input type="radio"/>            | <input type="checkbox"/> | <input type="checkbox"/> |
| 12B. Shipping and receiving frozen food                                       | <input type="radio"/> | <input type="radio"/> | <input checked="" type="radio"/> | <input type="radio"/>            | <input type="checkbox"/> | <input type="checkbox"/> |
| 13. Food in good condition, honestly presented, safe, & unadulterated         | <input type="radio"/> | <input type="radio"/> |                                  |                                  | <input type="checkbox"/> | <input type="checkbox"/> |
| 13B. Food package integrity   | <input type="radio"/> | <input type="radio"/> |                                  |                                  | <input type="checkbox"/> | <input type="checkbox"/> |
| 14A. Required records available: shellstock tags, parasite destruction        | <input type="radio"/> | <input type="radio"/> | <input type="radio"/>            | <input checked="" type="radio"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 14B. Missing shellstock tags, destruction                                     | <input type="radio"/> | <input type="radio"/> | <input type="radio"/>            | <input checked="" type="radio"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 14C. Parasite destruction- storing raw/partially cooked fish                  | <input type="radio"/> | <input type="radio"/> | <input type="radio"/>            | <input checked="" type="radio"/> | <input type="checkbox"/> | <input type="checkbox"/> |

### Protection from Contamination

- |  | IN                    | OUT                   | N/O                              | N/A                              | COS                      | REPEAT                   |
|--|-----------------------|-----------------------|----------------------------------|----------------------------------|--------------------------|--------------------------|
| 15A. Food separated & protected  | <input type="radio"/> | <input type="radio"/> | <input checked="" type="radio"/> | <input type="radio"/>            | <input type="checkbox"/> | <input type="checkbox"/> |
| 15B. Cleaning equip/utensils/food containers                               | <input type="radio"/> | <input type="radio"/> | <input checked="" type="radio"/> | <input type="radio"/>            | <input type="checkbox"/> | <input type="checkbox"/> |
| 16A. Food-contact surfaces: cleaned & sanitized immersion 171° F and above | <input type="radio"/> | <input type="radio"/> |                                  | <input checked="" type="radio"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 16B. Food contact surfaces cleaned and sanitized NMT 194° F, NLT 180° F    | <input type="radio"/> | <input type="radio"/> |                                  | <input checked="" type="radio"/> | <input type="checkbox"/> | <input type="checkbox"/> |

*Spencer Reano*

Inspector

Acknowledged Receipt : Rachel Oppenheimer

Page 2 of 6

## Food Establishment Inspection Report - FDA

### Protection from Contamination

	IN	OUT	N/O	N/A	COS	REPEAT
16C. Mechanical warewashing equipment sanitization food contact surfaces, equip., utensils	<input type="radio"/>	<input type="radio"/>		<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
17. Proper disposition of returned, previously served reconditions, & unsafe food	<input type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>

### Time/Temperature Control for Safety Food (TCS Food)

	IN	OUT	N/O	N/A	COS	REPEAT
18A. Proper cooking time & temperatures	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
18B. Whole meat cooking and serving, storing	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
18C. Microwave cooking of raw animal foods	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
19. Proper reheating procedures for hot holding	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
20. Proper cooling time & temperatures	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
21. Proper hot holding temperatures	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
22. Proper cold holding temperatures	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
23. Proper Date Marking	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
23B. TCS Foods Disposition	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
24A. Time as a public health control: procedures	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
24B. Time as a public health control: temperatures & discarding food	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
24C. Time as a public health control: highly susceptible population (HSP)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

### Consumer Advisory

	IN	OUT	N/O	N/A	COS	REPEAT
25. Consumer advisory provided for raw or undercooked foods	<input type="radio"/>	<input type="radio"/>		<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

### Highly Susceptible Populations (HSP)

	IN	OUT	N/O	N/A	COS	REPEAT
26A. Pasteurized foods used; prohibited foods not offered	<input type="radio"/>	<input type="radio"/>		<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
26B. Reservice of foods	<input type="radio"/>	<input type="radio"/>		<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

### Chemical

	IN	OUT	N/O	N/A	COS	REPEAT
27. Food additives: approved and properly used	<input type="radio"/>	<input type="radio"/>		<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
28A. Toxic substances identified, stored and used	<input type="radio"/>	<input type="radio"/>		<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
28B. Poisonous materials, sanitizers, additives, medicines restriction, separation, storage	<input type="radio"/>	<input type="radio"/>		<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
28C. Conditions of Use: law	<input type="radio"/>	<input type="radio"/>		<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

### Conformance with Approved Procedures

	IN	OUT	N/O	N/A	COS	REPEAT
29A. Compliance with variance, specialized process, & HACCP plan	<input type="radio"/>	<input type="radio"/>		<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
29B. Treating juice- HACCP, reduced oxygen packaging w/out variance, conformance with approved procedures	<input type="radio"/>	<input type="radio"/>		<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
29C. When HACCP plan is required	<input type="radio"/>	<input type="radio"/>		<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

*Spencer Reano*

Inspector

Acknowledged Receipt : Rachel Oppenheimer

Page 3 of 6

## Food Establishment Inspection Report - FDA

### GOOD RETAIL PRACTICES

Good Retail Practices are preventative measures to control the addition of pathogens, chemicals, and physical objects into foods.

IN = In compliance OUT = not in compliance COS - corrected on -site during inspection REPEAT = repeat violation

#### Safe Food and Water

	IN	OUT	N/O	N/A	COS	REPEAT
30. Pasteurized eggs used where required	<input type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>
31A. Water & ice from approved source	<input type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>
31B. Sampling, alternative water supply	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>
31C. Sampling report	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>
32. Variance obtained for specialized processing methods	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>

#### Food Temperature Control

	IN	OUT	N/O	N/A	COS	REPEAT
33A. Proper cooling methods used; adequate equipment for temperature control	<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>
33B. Frozen food	<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>
34. Plant food properly cooked for hot holding	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
35. Approved thawing methods used	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
36A. Thermometers provided and accurate	<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>
36B. Thermometers function properly	<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>

#### Food Identification

	IN	OUT	COS	REPEAT
37A. Food properly labeled; original container	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
37B. Food labels, labeling of ingredients	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

#### Prevention of Food Contamination

	IN	OUT	COS	REPEAT
38A. Insects, rodents, & animals not present	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
38B. Handling prohibition, controlling pests, prohibiting animals	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
39A. Contamination prevented during food storage	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
39B. Food display; ice used as an exterior coolant prohibited as an ingredient	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
39C. Consumer self-service operations- utensils and monitoring	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
40A. Personal cleanliness- prohibition jewelry	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
40B. Maintenance of fingernails	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
41. Wiping cloths; properly used and stored	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
42A. Washing Produce - following chemical manufacturers label	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
42B. Washing produce	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
42C. Washing produce- chemicals	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

#### Proper Use of Utensils

	IN	OUT	COS	REPEAT
43. In-use utensils; properly stored	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

*Spencer Keno*

Inspector

Acknowledged Receipt : Rachel Oppenheimer

Page 4 of 6

## Food Establishment Inspection Report - FDA

### Proper Use of Utensils

	IN	OUT	COS	REPEAT
44. Utensils, equipment & linens; properly stored, dried, and handled	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
45A. Single-use/ single service articles properly stored and used, required	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
45B. Single-use/service articles use limitation, kitchenware and tableware preventing contamination	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
46. Gloves used properly	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

### Utensils, Equipment and Vending

	IN	OUT	COS	REPEAT
47A. Food & non-food contact surfaces cleanable	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
47B. Food contact surfaces /utensils cleanability, molluscan shellfish tanks, consumer self-service	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
47C. Properly designed characteristics: food and non-food contact surfaces, molluscan shellfish tanks	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
48A. Warewashing facilities: installed, maintained, & used; test strips	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
48B. Operational warewashing machines	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
49. Non-food contact surfaces clean	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

### Physical Facilities

	IN	OUT	N/A	COS	REPEAT
50. Hot & cold water available; adequate pressure	<input checked="" type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>
51A. Plumbing installed; proper backflow devices	<input checked="" type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>
51B. Prohibiting a cross-connection, inspection and servicing system	<input checked="" type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>
51C. Approved system and cleanable fixtures, service sink	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
52A. Sewage and waste water properly disposed	<input checked="" type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>
52B. Grease traps easily accessible for cleaning	<input checked="" type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>
52C. Removing mobile food establishment waste	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
53A. Toilet facilities; properly constructed, supplied, & cleaned	<input checked="" type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>
53B. Toilet tissue availability	<input checked="" type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>
54. Garbage & refuse properly disposed; facilities maintained	<input checked="" type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>
55A. Physical facilities installed, maintained, & clean	<input checked="" type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>
55B. Private homes and living or sleeping quarters, use prohibition	<input checked="" type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>
56. Adequate ventilation & lighting; designated areas used	<input checked="" type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>

### MASSACHUSETTS ONLY REGULATIONS

Rules and Regulations adopted for use in Massachusetts only.

### Facilities

	IN	OUT	COS	REPEAT
57A. Catering	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
57B. When plans are reviewed, prerequisite for operations- valid permit	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
57C. Contents of plans and specifications, preoperational inspections	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

*Stanton*

Inspector

Acknowledged Receipt : Rachel Oppenheimer

Page 5 of 6

## Food Establishment Inspection Report - FDA

### Facilities

58. Mobile Food Operations

IN OUT COS REPEAT

☐ ☐ ☐ ☐

59. Temporary Food Establishments

☐ ☐ ☐ ☐

60. Residential Kitchens

☐ ☐ ☐ ☐

### Procedures

61. Anti-choking Procedures

☒ ☐ ☐ ☐

*Fail Notes* | [590.009(E)] *Anti-choking Procedures*

62. Tobacco Products: Notice and Sale

☐ ☐ ☐ ☐

63. Food Allergy Awareness Requirements

☐ ☒ ☒ ☐

*Fail Notes* | [590.009(G)] *Food Allergy Awareness Requirements*

*Spencer Reno*

Inspector

Acknowledged Receipt : Rachel Oppenheimer

Page 6 of 6



City of Newton  
Health and Human Services  
Deborah Youngblood, PhD, Commissioner  
1000 Commonwealth Ave Newton, MA 02459  
(617) 796-1420



**Public Health**  
Prevent. Promote. Protect.

Food Establishment Inspection Report - FDA

**Insp Date:** 1/25/2018 **Business ID:** 1N2393  
**Business:** Zervas School  
30 Beethoven Ave.  
Newton, MA 02468

**Inspection:** 6N000014  
**Section:** 3  
**Phone:** 617-559-6750  
**Inspector:** 1N11123 Nicola Assan  
**Reason:** 1-Routine  
**Results:** No Follow-up R2

Inspection Summary

Official Order for Correction: Based on an inspection today, the items checked indicate violations of 105 CMR 590.000/ 2013 Federal Food Code. This report, when signed below by the Commissioner of Health / Agent constitutes an order by the Commissioner of Health. Failure to correct violations cited in this report may result in suspension or revocation of the food establishment permit and cessation of food establishment operations. If aggrieved by this order, you have the right to a hearing. The request must be in writing and submitted to the Commissioner of Health at the above address within 10 days of receipt of this order.

Est. Type 1 - Food Svc Establis License/Permit # \_\_\_\_\_ Risk Category 02 Risk Level Observed 02 Low

Foodborne Illness Complaint Investigated (All) ☐ Involving More Than Two Persons ☐

FOODBORNE ILLNESS RISK FACTORS AND PUBLIC HEALTH INTERVENTIONS

Compliance status: IN = in compliance OUT = not in compliance N/O = not observed N/A = not applicable

Marked in appropriate box for COS and/or R. COS = corrected on-site during inspection R = repeat violation

Risk factors are improper practices or procedures identified as the most prevalent contributing factors of foodborne illness or injury. Public Health Interventions are control measures to prevent foodborne illnesses or injury.

Supervision

1. PIC Present, Knowledge and Duties
2. Certified Food Protection Manager

IN	OUT	N/O	N/A	COS	REPEAT
<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>
<input checked="" type="radio"/>	<input type="radio"/>		<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

Employee Health / Responding to Contamination Events

- 3A. Employee Health: PIC Knowledge, Responsibilities & Reporting
- 3B. Employee Reporting to PIC
4. Proper Use of Restriction & Exclusion
5. Clean-up of Vomiting and Diarrheal Events

IN	OUT	N/O	N/A	COS	REPEAT
<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>
<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>
<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>
<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>

Good Hygienic Practices

- 6A. Proper eating, tasting, drinking, or tobacco use
- 6B. Preventing contamination when tasting

IN	OUT	N/O	N/A	COS	REPEAT
<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>
<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>

Inspector

Acknowledged Receipt :

Page 1 of 6

## Food Establishment Inspection Report - FDA

### Good Hygienic Practices

7. No discharge from eyes, nose, and mouth

IN	OUT	N/O	N/A	COS	REPEAT
<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>

### Control of Hands as a Vehicle of Contamination

8A. Hands clean & properly washed

IN	OUT	N/O	N/A	COS	REPEAT
<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>

8B. Where to wash, hand antiseptics

IN	OUT	N/O	N/A	COS	REPEAT
<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>

9. No bare hand contact with RTE food or a pre-approved alternative procedure properly allowed

IN	OUT	N/O	N/A	COS	REPEAT
<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

10A. Adequate handwashing sinks properly supplied and accessible

IN	OUT	N/O	N/A	COS	REPEAT
<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>

10B. Handwashing sinks accesible with proper signage, handwashing aids

IN	OUT	N/O	N/A	COS	REPEAT
<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>

### Approved Sources

11A. Milk, eggs, juice, bottled water, hermetically sealed food, game animals

IN	OUT	N/O	N/A	COS	REPEAT
<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

11B. Packaged foods, labeling, whole muscle beef

IN	OUT	N/O	N/A	COS	REPEAT
<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

11C. Obtaining raw fish, packaged meat & poultry, eggs

IN	OUT	N/O	N/A	COS	REPEAT
<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

12A. Food received at proper temperature

IN	OUT	N/O	N/A	COS	REPEAT
<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

12B. Shipping and receiving frozen food

IN	OUT	N/O	N/A	COS	REPEAT
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

13. Food in good condition, honestly presented, safe, & unadulterated

IN	OUT	N/O	N/A	COS	REPEAT
<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>

13B. Food package integrity

IN	OUT	N/O	N/A	COS	REPEAT
<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>

14A. Required records available: shellstock tags, parasite destruction

IN	OUT	N/O	N/A	COS	REPEAT
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

14B. Missing shellstock tags, destruction

IN	OUT	N/O	N/A	COS	REPEAT
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

14C. Parasite destruction- storing raw/partially cooked fish

IN	OUT	N/O	N/A	COS	REPEAT
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

### Protection from Contamination

15A. Food separated & protected

IN	OUT	N/O	N/A	COS	REPEAT
<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

15B. Cleaning equip/utensils/food containers

IN	OUT	N/O	N/A	COS	REPEAT
<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

16A. Food-contact surfaces: cleaned & sanitized immersion 171° F and above

IN	OUT	N/O	N/A	COS	REPEAT
<input checked="" type="radio"/>	<input type="radio"/>		<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

16B. Food contact surfaces cleaned and sanitized NMT 194° F, NLT 180° F

IN	OUT	N/O	N/A	COS	REPEAT
<input type="radio"/>	<input type="radio"/>		<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

16C. Mechanical warewashing equipment sanitization food contact surfaces, equip., utensils

IN	OUT	N/O	N/A	COS	REPEAT
<input type="radio"/>	<input type="radio"/>		<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

17. Proper disposition of returned, previously served reconditions, & unsafe food

IN	OUT	N/O	N/A	COS	REPEAT
<input type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>

### Time/Temperature Control for Safety Food (TCS Food)

18A. Proper cooking time & temperatures

IN	OUT	N/O	N/A	COS	REPEAT
<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

18B. Whole meat cooking and serving, storing

IN	OUT	N/O	N/A	COS	REPEAT
<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

18C. Microwave cooking of raw animal foods

IN	OUT	N/O	N/A	COS	REPEAT
<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

19. Proper reheating procedures for hot holding

IN	OUT	N/O	N/A	COS	REPEAT
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

20. Proper cooling time & temperatures

IN	OUT	N/O	N/A	COS	REPEAT
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

21. Proper hot holding temperatures

IN	OUT	N/O	N/A	COS	REPEAT
<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

Inspector

Acknowledged Receipt :

Page 2 of 6

## Food Establishment Inspection Report - FDA

### Time/Temperature Control for Safety Food (TCS Food)

22. Proper cold holding temperatures

IN OUT N/O N/A COS REPEAT  
☒ ☐ ☐ ☐ ☐ ☐

23. Proper Date Marking

☒ ☐ ☐ ☐ ☐ ☐

23B. TCS Foods Disposition

☒ ☐ ☐ ☐ ☐ ☐

24A. Time as a public health control: procedures

☐ ☐ ☐ ☒ ☐ ☐

24B. Time as a public health control: temperatures & discarding food

☐ ☐ ☐ ☒ ☐ ☐

24C. Time as a public health control: highly susceptible population (HSP)

☐ ☐ ☐ ☒ ☐ ☐

### Consumer Advisory

25. Consumer advisory provided for raw or undercooked foods

IN OUT N/O N/A COS REPEAT  
☐ ☐ ☐ ☒ ☐ ☐

### Highly Susceptible Populations (HSP)

26A. Pasteurized foods used; prohibited foods not offered

☒ ☐ ☐ ☐ ☐ ☐

26B. Reservice of foods

☐ ☐ ☐ ☒ ☐ ☐

### Chemical

27. Food additives: approved and properly used

☐ ☐ ☐ ☒ ☐ ☐

28A. Toxic substances identified, stored and used

☒ ☐ ☐ ☐ ☐ ☐

28B. Poisonous materials, sanitizers, additives, medicines restriction, separation, storage

☒ ☐ ☐ ☐ ☐ ☐

28C. Conditions of Use: law

☒ ☐ ☐ ☐ ☐ ☐

### Conformance with Approved Procedures

29A. Compliance with variance, specialized process, & HACCP plan

☐ ☐ ☐ ☒ ☐ ☐

29B. Treating juice- HACCP, reduced oxygen packaging w/out variance, conformance with approved procedures

☐ ☐ ☐ ☒ ☐ ☐

29C. When HACCP plan is required

☐ ☐ ☐ ☒ ☐ ☐

### GOOD RETAIL PRACTICES

Good Retail Practices are preventative measures to control the addition of pathogens, chemicals, and physical objects into foods.

IN = In compliance OUT = not in compliance COS - corrected on -site during inspection REPEAT = repeat violation

### Safe Food and Water

30. Pasteurized eggs used where required

IN OUT N/O N/A COS REPEAT  
☒ ☐ ☐ ☐ ☐ ☐

31A. Water & ice from approved source

☒ ☐ ☐ ☐ ☐ ☐

31B. Sampling, alternative water supply

☐ ☐ ☐ ☒ ☐ ☐

31C. Sampling report

☐ ☐ ☐ ☒ ☐ ☐

32. Variance obtained for specialized processing methods

☐ ☐ ☐ ☒ ☐ ☐

### Food Temperature Control

33A. Proper cooling methods used; adequate equipment for temperature control

IN OUT N/O N/A COS REPEAT  
☐ ☐ ☐ ☐ ☐ ☐

Inspector \_\_\_\_\_

Acknowledged Receipt : \_\_\_\_\_

Page 3 of 6

## Food Establishment Inspection Report - FDA

### Food Temperature Control

	IN	OUT	N/O	N/A	COS	REPEAT
33B. Frozen food	<input type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>
34. Plant food properly cooked for hot holding	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
35. Approved thawing methods used	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
<b><i>This item has Notes. See Footnote 1 at end of questionnaire.</i></b>						
36A. Thermometers provided and accurate	<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>
36B. Thermometers function properly	<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>

### Food Identification

	IN	OUT	COS	REPEAT
37A. Food properly labeled; original container	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
37B. Food labels, labeling of ingredients	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

### Prevention of Food Contamination

	IN	OUT	COS	REPEAT
38A. Insects, rodents, & animals not present	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
38B. Handling prohibition, controlling pests, prohibiting animals	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
39A. Contamination prevented during food storage	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
39B. Food display; ice used as an exterior coolant prohibited as an ingredient	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
39C. Consumer self-service operations- utensils and monitoring	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
40A. Personal cleanliness- prohibition jewelry	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
40B. Maintenance of fingernails	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
41. Wiping cloths; properly used and stored	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
42A. Washing Produce - following chemical manufacturers label	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
42B. Washing produce	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
42C. Washing produce- chemicals	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

### Proper Use of Utensils

	IN	OUT	COS	REPEAT
43. In-use utensils; properly stored	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
44. Utensils, equipment & linens; properly stored, dried, and handled	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
45A. Single-use/ single service articles properly stored and used, required	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
45B. Single-use/service articles use limitation, kitchenware and tableware preventing contamination	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
46. Gloves used properly	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

### Utensils, Equipment and Vending

	IN	OUT	COS	REPEAT
47A. Food & non-food contact surfaces cleanable	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
47B. Food contact surfaces /utensils cleanability, molluscan shellfish tanks, consumer self-service	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
47C. Properly designed characteristics: food and non-food contact surfaces, molluscan shellfish tanks	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
48A. Warewashing facilities: installed, maintained, & used; test strips	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

Inspector \_\_\_\_\_

Acknowledged Receipt : \_\_\_\_\_

Page 4 of 6

## Food Establishment Inspection Report - FDA

### Utensils, Equipment and Vending

	IN	OUT	COS	REPEAT
48B. Operational warewashing machines	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
49. Non-food contact surfaces clean	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

### Physical Facilities

	IN	OUT	N/A	COS	REPEAT
50. Hot & cold water available; adequate pressure	<input checked="" type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>
51A. Plumbing installed; proper backflow devices	<input checked="" type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>
51B. Prohibiting a cross-connection, inspection and servicing system	<input checked="" type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>
51C. Approved system and cleanable fixtures, service sink	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
52A. Sewage and waste water properly disposed	<input checked="" type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>
52B. Grease traps easily accessible for cleaning	<input checked="" type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>
52C. Removing mobile food establishment waste	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
53A. Toilet facilities; properly constructed, supplied, & cleaned	<input checked="" type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>
53B. Toilet tissue availability	<input checked="" type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>
54. Garbage & refuse properly disposed; facilities maintained	<input checked="" type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>
55A. Physical facilities installed, maintained, & clean	<input checked="" type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>
55B. Private homes and living or sleeping quarters, use prohibition	<input checked="" type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>
56. Adequate ventilation & lighting; designated areas used	<input checked="" type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>

### MASSACHUSETTS ONLY REGULATIONS

Rules and Regulations adopted for use in Massachusetts only.

#### Facilities

	IN	OUT	COS	REPEAT
57A. Catering	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
57B. When plans are reviewed, prerequisite for operations- valid permit	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
57C. Contents of plans and specifications, preoperational inspections	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
58. Mobile Food Operations	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
59. Temporary Food Establishments	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
60. Residential Kitchens	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

#### Procedures

	IN	OUT	COS	REPEAT
61. Anti-choking Procedures	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
62. Tobacco Products: Notice and Sale	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
63. Food Allergy Awareness Requirements	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

Inspector \_\_\_\_\_

Acknowledged Receipt : \_\_\_\_\_

Page 5 of 6

## Food Establishment Inspection Report - FDA

### **Footnote 1**

#### **Notes:**

PIC informed me that she rarely thaws any food but if she does, the food is thawed in the refrigerator.

---

Inspector

---

Acknowledged Receipt :

Page 6 of 6



**City of Newton**  
**Health and Human Services**  
 Deborah Youngblood, PhD, Commissioner  
 1000 Commonwealth Ave Newton, MA 02459  
 (617) 796-1420



**Public Health**  
 Prevent. Promote. Protect.

**Food Establishment Inspection Report - FDA**

**Insp Date:** 10/22/2018    **Business ID:** 1N2393  
**Business:** Zervas School  
 30 Beethoven Ave.

Newton, MA 02468

**Inspection:** 6N000054  
**Section:** 3  
**Phone:** 617-559-6750  
**Inspector:** 1N11123 Nicola Assan  
**Reason:** 1-Routine  
**Results:** No Follow-up R2

**Inspection Summary**

Official Order for Correction: Based on an inspection today, the items checked indicate violations of 105 CMR 590.000/ 2013 Federal Food Code. This report, when signed below by the Commissioner of Health / Agent constitutes an order by the Commissioner of Health. Failure to correct violations cited in this report may result in suspension or revocation of the food establishment permit and cessation of food establishment operations. If aggrieved by this order, you have the right to a hearing. The request must be in writing and submitted to the Commissioner of Health at the above address within 10 days of receipt of this order.

Est. Type 1 - Food Svc Establis License/Permit # \_\_\_\_\_ Risk Category 02 Risk Level Observed 02 Low

Foodborne Illness Complaint Investigated (All) ☐ Involving More Than Two Persons ☐

**FOODBORNE ILLNESS RISK FACTORS AND PUBLIC HEALTH INTERVENTIONS**

Compliance status: IN = in compliance OUT = not in compliance N/O = not observed N/A = not applicable

Marked in appropriate box for COS and/or R. COS = corrected on-site during inspection R = repeat violation

Risk factors are improper practices or procedures identified as the most prevalent contributing factors of foodborne illness or injury. Public Health Interventions are control measures to prevent foodborne illnesses or injury.

**Supervision**

1. PIC Present, Knowledge and Duties

IN	OUT	N/O	N/A	COS	REPEAT
<input type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>

***This item has Notes. See Footnote 1 at end of questionnaire.***

2. Certified Food Protection Manager

<input type="radio"/>	<input type="radio"/>		<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
-----------------------	-----------------------	--	-----------------------	--------------------------	--------------------------

**Employee Health / Responding to Contamination Events**

3A. Employee Health: PIC Knowledge, Responsibilities & Reporting

IN	OUT	N/O	N/A	COS	REPEAT
<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>

3B. Employee Reporting to PIC

<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>
----------------------------------	-----------------------	--	--	--------------------------	--------------------------

4. Proper Use of Restriction & Exclusion

<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>
----------------------------------	-----------------------	--	--	--------------------------	--------------------------

5. Clean-up of Vomiting and Diarrheal Events

<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>
----------------------------------	-----------------------	--	--	--------------------------	--------------------------

**Good Hygienic Practices**

6A. Proper eating, tasting, drinking, or tobacco use

IN	OUT	N/O	N/A	COS	REPEAT
<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>

6B. Preventing contamination when tasting

<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>
----------------------------------	-----------------------	-----------------------	--	--------------------------	--------------------------

*Assan*

Inspector

Acknowledged Receipt : Tim Viveiros

Page 1 of 7

## Food Establishment Inspection Report - FDA

### Good Hygienic Practices

7. No discharge from eyes, nose, and mouth

IN	OUT	N/O	N/A	COS	REPEAT
<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>

### Control of Hands as a Vehicle of Contamination

8A. Hands clean & properly washed

IN	OUT	N/O	N/A	COS	REPEAT
<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>

8B. Where to wash, hand antiseptics

IN	OUT	N/O	N/A	COS	REPEAT
<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>

9. No bare hand contact with RTE food or a pre-approved alternative procedure properly allowed

IN	OUT	N/O	N/A	COS	REPEAT
<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

10A. Adequate handwashing sinks properly supplied and accessible

IN	OUT	N/O	N/A	COS	REPEAT
<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>

10B. Handwashing sinks accesible with proper signage, handwashing aids

IN	OUT	N/O	N/A	COS	REPEAT
<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>

### Approved Sources

11A. Milk, eggs, juice, bottled water, hermetically sealed food, game animals

IN	OUT	N/O	N/A	COS	REPEAT
<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

11B. Packaged foods, labeling, whole muscle beef

IN	OUT	N/O	N/A	COS	REPEAT
<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

11C. Obtaining raw fish, packaged meat & poultry, eggs

IN	OUT	N/O	N/A	COS	REPEAT
<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

12A. Food received at proper temperature

IN	OUT	N/O	N/A	COS	REPEAT
<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

12B. Shipping and receiving frozen food

IN	OUT	N/O	N/A	COS	REPEAT
<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

13. Food in good condition, honestly presented, safe, & unadulterated

IN	OUT	N/O	N/A	COS	REPEAT
<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>

13B. Food package integrity

IN	OUT	N/O	N/A	COS	REPEAT
<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>

14A. Required records available: shellstock tags, parasite destruction

IN	OUT	N/O	N/A	COS	REPEAT
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

14B. Missing shellstock tags, destruction

IN	OUT	N/O	N/A	COS	REPEAT
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

14C. Parasite destruction- storing raw/partially cooked fish

IN	OUT	N/O	N/A	COS	REPEAT
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

### Protection from Contamination

15A. Food separated & protected

IN	OUT	N/O	N/A	COS	REPEAT
<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

15B. Cleaning equip/utensils/food containers

IN	OUT	N/O	N/A	COS	REPEAT
<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

16A. Food-contact surfaces: cleaned & sanitized immersion 171° F and above

IN	OUT	N/O	N/A	COS	REPEAT
<input checked="" type="radio"/>	<input type="radio"/>		<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

Fail Notes 4-501.114 (A-E, F 1&2)

*Chemical Sanitization - Temperature, pH, Concentration and Hardness  
[The temperature of the water for the sanitizing solution in the 3 bay compartment sink was 68.7 degrees F (20.4 degrees C). A quaternary ammonium compound solution shall have a minimum temperature of 75 degrees F (24 degrees C).]*

16B. Food contact surfaces cleaned and sanitized NMT 194° F, NLT 180° F

IN	OUT	N/O	N/A	COS	REPEAT
<input checked="" type="radio"/>	<input type="radio"/>		<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

16C. Mechanical warewashing equipment sanitization food contact surfaces, equip., utensils

IN	OUT	N/O	N/A	COS	REPEAT
<input type="radio"/>	<input type="radio"/>		<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

17. Proper disposition of returned, previously served reconditions, & unsafe food

IN	OUT	N/O	N/A	COS	REPEAT
<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>

### Time/Temperature Control for Safety Food (TCS Food)

18A. Proper cooking time & temperatures

IN	OUT	N/O	N/A	COS	REPEAT
<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

18B. Whole meat cooking and serving, storing

IN	OUT	N/O	N/A	COS	REPEAT
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

*Assan*

Inspector

Acknowledged Receipt : Tim Viveiros

Page 2 of 7

## Food Establishment Inspection Report - FDA

### Time/Temperature Control for Safety Food (TCS Food)

	IN	OUT	N/O	N/A	COS	REPEAT
18C. Microwave cooking of raw animal foods	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
19. Proper reheating procedures for hot holding	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
20. Proper cooling time & temperatures	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
21. Proper hot holding temperatures	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
<b><i>This item has Notes. See Footnote 2 at end of questionnaire.</i></b>						
22. Proper cold holding temperatures	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
23. Proper Date Marking	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
<b><i>This item has Notes. See Footnote 3 at end of questionnaire.</i></b>						
23B. TCS Foods Disposition	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
24A. Time as a public health control: procedures	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
24B. Time as a public health control: temperatures & discarding food	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
24C. Time as a public health control: highly susceptible population (HSP)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

### Consumer Advisory

	IN	OUT	N/O	N/A	COS	REPEAT
25. Consumer advisory provided for raw or undercooked foods	<input type="radio"/>	<input type="radio"/>		<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

### Highly Susceptible Populations (HSP)

	IN	OUT	N/O	N/A	COS	REPEAT
26A. Pasteurized foods used; prohibited foods not offered	<input type="radio"/>	<input type="radio"/>		<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
26B. Reservice of foods	<input type="radio"/>	<input type="radio"/>		<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

### Chemical

	IN	OUT	N/O	N/A	COS	REPEAT
27. Food additives: approved and properly used	<input type="radio"/>	<input type="radio"/>		<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
28A. Toxic substances identified, stored and used	<input checked="" type="radio"/>	<input type="radio"/>		<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
28B. Poisonous materials, sanitizers, additives, medicines restriction, separation, storage	<input checked="" type="radio"/>	<input type="radio"/>		<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
28C. Conditions of Use: law	<input checked="" type="radio"/>	<input type="radio"/>		<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

### Conformance with Approved Procedures

	IN	OUT	N/O	N/A	COS	REPEAT
29A. Compliance with variance, specialized process, & HACCP plan	<input type="radio"/>	<input type="radio"/>		<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
29B. Treating juice- HACCP, reduced oxygen packaging w/out variance, conformance with approved procedures	<input type="radio"/>	<input type="radio"/>		<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
29C. When HACCP plan is required	<input type="radio"/>	<input type="radio"/>		<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

### GOOD RETAIL PRACTICES

Good Retail Practices are preventative measures to control the addition of pathogens, chemicals, and physical objects into foods.

IN = In compliance    OUT = not in compliance    COS - corrected on -site during inspection    REPEAT = repeat violation

### Safe Food and Water

	IN	OUT	N/O	N/A	COS	REPEAT
30. Pasteurized eggs used where required	<input type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>
31A. Water & ice from approved source	<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>

*Assessor*

Inspector

Acknowledged Receipt : Tim Viveiros

Page 3 of 7

## Food Establishment Inspection Report - FDA

### Safe Food and Water

31B. Sampling, alternative water supply

IN OUT N/O N/A COS REPEAT  
☐ ☐ ☒ ☐ ☐

31C. Sampling report

☐ ☐ ☒ ☐ ☐

32. Variance obtained for specialized processing methods

☐ ☐ ☒ ☐ ☐

### Food Temperature Control

33A. Proper cooling methods used; adequate equipment for temperature control

☐ ☐ ☐ ☐

33B. Frozen food

☒ ☐ ☐ ☐

34. Plant food properly cooked for hot holding

☐ ☐ ☒ ☐ ☐

35. Approved thawing methods used

☐ ☐ ☒ ☐ ☐

36A. Thermometers provided and accurate

☒ ☐ ☐ ☐

36B. Thermometers function properly

☒ ☐ ☐ ☐

### Food Identification

37A. Food properly labeled; original container

IN OUT COS REPEAT  
☐ ☒ ☐ ☐

Fail Notes

3-302.12

*Food Storage Containers Identified with Common Name of Food  
 [There was a squeeze bottle of ketchup that was not labeled in the cold holding unit behind the serving area. Containers of food or ingredients that are removed from their original packages for use shall be identified with the common name of the food. Label all containers and squeeze bottles.]*

37B. Food labels, labeling of ingredients

☒ ☐ ☐ ☐

### Prevention of Food Contamination

38A. Insects, rodents, & animals not present

☒ ☐ ☐ ☐

38B. Handling prohibition, controlling pests, prohibiting animals

☒ ☐ ☐ ☐

39A. Contamination prevented during food storage

☒ ☐ ☐ ☐

39B. Food display; ice used as an exterior coolant prohibited as an ingredient

☒ ☐ ☐ ☐

39C. Consumer self-service operations- utensils and monitoring

☒ ☐ ☐ ☐

40A. Personal cleanliness- prohibition jewelry

☒ ☐ ☐ ☐

40B. Maintenance of fingernails

☒ ☐ ☐ ☐

41. Wiping cloths; properly used and stored

☒ ☐ ☐ ☐

42A. Washing Produce - following chemical manufacturers label

☐ ☐ ☐ ☐

42B. Washing produce

☒ ☐ ☐ ☐

42C. Washing produce- chemicals

☐ ☐ ☐ ☐

### Proper Use of Utensils

43. In-use utensils; properly stored

☒ ☐ ☐ ☐

44. Utensils, equipment & linens; properly stored, dried, and handled

☒ ☐ ☐ ☐

45A. Single-use/ single service articles properly stored and used, required

☒ ☐ ☐ ☐

*NA320A*

Inspector

Acknowledged Receipt : Tim Viveiros

Page 4 of 7

## Food Establishment Inspection Report - FDA

### Proper Use of Utensils

45B. Single-use/service articles use limitation, kitchenware and tableware preventing contamination

IN OUT COS REPEAT  
☒ ☐ ☐ ☐

46. Gloves used properly

☒ ☐ ☐ ☐

### Utensils, Equipment and Vending

47A. Food & non-food contact surfaces cleanable

☒ ☐ ☐ ☐

47B. Food contact surfaces /utensils cleanability, molluscan shellfish tanks, consumer self-service

☒ ☐ ☐ ☐

47C. Properly designed characteristics: food and non-food contact surfaces, molluscan shellfish tanks

☒ ☐ ☐ ☐

48A. Warewashing facilities: installed, maintained, & used; test strips

☐ ☒ ☐ ☐

**Fail Notes** | 4-501.19 *Manual warewashing equipment, wash solution temperature*  
*[The temperature of the wash solution in the 3 bay compartment sink was 102.9 degrees F (39.4 degrees C). The wash solution temperature required in the Code is essential for removing organic matter. If the temperature is below 110 degrees F, the performance of the detergent may be adversely affected, e.g., animal fats that may be present on the dirty dishes would not be dissolved.]*

48B. Operational warewashing machines

☐ ☐ ☐ ☐

49. Non-food contact surfaces clean

☒ ☐ ☐ ☐

### Physical Facilities

50. Hot & cold water available; adequate pressure

IN OUT N/A COS REPEAT  
☒ ☐ ☐ ☐

51A. Plumbing installed; proper backflow devices

☒ ☐ ☐ ☐

51B. Prohibiting a cross-connection, inspection and servicing system

☒ ☐ ☐ ☐

51C. Approved system and cleanable fixtures, service sink

☐ ☐ ☐ ☐ ☐

52A. Sewage and waste water properly disposed

☒ ☐ ☐ ☐

52B. Grease traps easily accessible for cleaning

☐ ☐ ☐ ☐

52C. Removing mobile food establishment waste

☐ ☐ ☒ ☐ ☐

53A. Toilet facilities; properly constructed, supplied, & cleaned

☒ ☐ ☐ ☐

53B. Toilet tissue availability

☒ ☐ ☐ ☐

54. Garbage & refuse properly disposed; facilities maintained

☐ ☒ ☐ ☐

**Fail Notes** | 5-501.13 *Receptacles*  
*[There was no waste receptacle at the hand sink located near the 3 bay compartment sink. Provide a small trash receptacle at all hand sinks.]*

55A. Physical facilities installed, maintained, & clean

☒ ☐ ☐ ☐

55B. Private homes and living or sleeping quarters, use prohibition

☒ ☐ ☐ ☐

56. Adequate ventilation & lighting; designated areas used

☒ ☐ ☐ ☐

### MASSACHUSETTS ONLY REGULATIONS

Rules and Regulations adopted for use in Massachusetts only.

*Masson*

Inspector

Acknowledged Receipt : Tim Viveiros

Page 5 of 7

## Food Establishment Inspection Report - FDA

### Facilities

	IN	OUT	COS	REPEAT
57A. Catering	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
57B. When plans are reviewed, prerequisite for operations- valid permit	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
57C. Contents of plans and specifications, preoperational inspections	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
58. Mobile Food Operations	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
59. Temporary Food Establishments	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
60. Residential Kitchens	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

### Procedures

	IN	OUT	COS	REPEAT
61. Anti-choking Procedures	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
62. Tobacco Products: Notice and Sale	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
63. Food Allergy Awareness Requirements	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>



Inspector

Acknowledged Receipt : Tim Viveiros

Page 6 of 7

## Food Establishment Inspection Report - FDA

### **Footnote 1**

**Notes:**

The permanent PIC was not present at time of visit (away on jury duty). The temporary PIC had not arrived to work in the kitchen at time of visit. The assistant I spoke informed me that she is not usually based at Zervas but just helping out; but not permitted to cook any food. She does not have a serve safe certificate.

### **Footnote 2**

**Notes:**

There was no food being hot held at time of the inspection, since the PIC had no arrived to prepare/cook food.

### **Footnote 3**

**Notes:**

Although there is a date marking system in place, there needs to be a clear indication of the date the food is prepared or the date the container is opened, and the date to consume or discard the food.



Inspector

Acknowledged Receipt : Tim Viveiros

Page 7 of 7



City of Newton  
Health and Human Services  
Deborah Youngblood, PhD, Commissioner  
1000 Commonwealth Ave Newton, MA 02459  
(617) 796-1420



Public Health  
Prevent. Promote. Protect.

Food Establishment Inspection Report - FDA

Insp Date: 5/6/2019 Business ID: 1N2393  
Business: Zervas School  
30 Beethoven Ave.  
Newton, MA 02468

Inspection: 6N000114  
Section: 3  
Phone: 617-559-6750  
Inspector: 1N11123 Nicola Assan  
Reason: 1-Routine  
Results: No Follow-up R2

Inspection Summary

Official Order for Correction: Based on an inspection today, the items checked indicate violations of 105 CMR 590.000/ 2013 Federal Food Code. This report, when signed below by the Commissioner of Health / Agent constitutes an order by the Commissioner of Health. Failure to correct violations cited in this report may result in suspension or revocation of the food establishment permit and cessation of food establishment operations. If aggrieved by this order, you have the right to a hearing. The request must be in writing and submitted to the Commissioner of Health at the above address within 10 days of receipt of this order.

Est. Type 1 - Food Svc Establis License/Permit # \_\_\_\_\_ Risk Category 02 Risk Level Observed 02 Low

Foodborne Illness Complaint Investigated (All) ☐ Involving More Than Two Persons ☐

FOODBORNE ILLNESS RISK FACTORS AND PUBLIC HEALTH INTERVENTIONS

Compliance status: IN = in compliance OUT = not in compliance N/O = not observed N/A = not applicable

Marked in appropriate box for COS and/or R. COS = corrected on-site during inspection R = repeat violation

Risk factors are improper practices or procedures identified as the most prevalent contributing factors of foodborne illness or injury. Public Health Interventions are control measures to prevent foodborne illnesses or injury.

Supervision

1. PIC Present, Knowledge and Duties
2. Certified Food Protection Manager

IN	OUT	N/O	N/A	COS	REPEAT
<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>
<input checked="" type="radio"/>	<input type="radio"/>		<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

Employee Health / Responding to Contamination Events

- 3A. Employee Health: PIC Knowledge, Responsibilities & Reporting
- 3B. Employee Reporting to PIC
4. Proper Use of Restriction & Exclusion
5. Clean-up of Vomiting and Diarrheal Events

IN	OUT	N/O	N/A	COS	REPEAT
<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>
<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>
<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>
<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>

Good Hygienic Practices

- 6A. Proper eating, tasting, drinking, or tobacco use
- 6B. Preventing contamination when tasting

IN	OUT	N/O	N/A	COS	REPEAT
<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>
<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>

*Assan*

Inspector

Acknowledged Receipt : Tim Viveiros

Page 1 of 5

## Food Establishment Inspection Report - FDA

### Good Hygienic Practices

7. No discharge from eyes, nose, and mouth

IN	OUT	N/O	N/A	COS	REPEAT
<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>

### Control of Hands as a Vehicle of Contamination

8A. Hands clean & properly washed

IN	OUT	N/O	N/A	COS	REPEAT
<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>

8B. Where to wash, hand antiseptics

IN	OUT	N/O	N/A	COS	REPEAT
<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>

9. No bare hand contact with RTE food or a pre-approved alternative procedure properly allowed

IN	OUT	N/O	N/A	COS	REPEAT
<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

10A. Adequate handwashing sinks properly supplied and accessible

IN	OUT	N/O	N/A	COS	REPEAT
<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>

10B. Handwashing sinks accessible with proper signage, handwashing aids

IN	OUT	N/O	N/A	COS	REPEAT
<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>

### Approved Sources

11A. Milk, eggs, juice, bottled water, hermetically sealed food, game animals

IN	OUT	N/O	N/A	COS	REPEAT
<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

11B. Packaged foods, labeling, whole muscle beef

IN	OUT	N/O	N/A	COS	REPEAT
<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

11C. Obtaining raw fish, packaged meat & poultry, eggs

IN	OUT	N/O	N/A	COS	REPEAT
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

12A. Food received at proper temperature

IN	OUT	N/O	N/A	COS	REPEAT
<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

12B. Shipping and receiving frozen food

IN	OUT	N/O	N/A	COS	REPEAT
<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

13. Food in good condition, honestly presented, safe, & unadulterated

IN	OUT	N/O	N/A	COS	REPEAT
<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>

13B. Food package integrity

IN	OUT	N/O	N/A	COS	REPEAT
<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>

14A. Required records available: shellstock tags, parasite destruction

IN	OUT	N/O	N/A	COS	REPEAT
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

14B. Missing shellstock tags, destruction

IN	OUT	N/O	N/A	COS	REPEAT
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

14C. Parasite destruction- storing raw/partially cooked fish

IN	OUT	N/O	N/A	COS	REPEAT
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

### Protection from Contamination

15A. Food separated & protected

IN	OUT	N/O	N/A	COS	REPEAT
<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

15B. Cleaning equip/utensils/food containers

IN	OUT	N/O	N/A	COS	REPEAT
<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

16A. Food-contact surfaces: cleaned & sanitized immersion 171° F and above

IN	OUT	N/O	N/A	COS	REPEAT
<input checked="" type="radio"/>	<input type="radio"/>		<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

16B. Food contact surfaces cleaned and sanitized NMT 194° F, NLT 180° F

IN	OUT	N/O	N/A	COS	REPEAT
<input checked="" type="radio"/>	<input type="radio"/>		<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

16C. Mechanical warewashing equipment sanitization food contact surfaces, equip., utensils

IN	OUT	N/O	N/A	COS	REPEAT
<input checked="" type="radio"/>	<input type="radio"/>		<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

17. Proper disposition of returned, previously served reconditions, & unsafe food

IN	OUT	N/O	N/A	COS	REPEAT
<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>

### Time/Temperature Control for Safety Food (TCS Food)

18A. Proper cooking time & temperatures

IN	OUT	N/O	N/A	COS	REPEAT
<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

18B. Whole meat cooking and serving, storing

IN	OUT	N/O	N/A	COS	REPEAT
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

18C. Microwave cooking of raw animal foods

IN	OUT	N/O	N/A	COS	REPEAT
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

19. Proper reheating procedures for hot holding

IN	OUT	N/O	N/A	COS	REPEAT
<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

20. Proper cooling time & temperatures

IN	OUT	N/O	N/A	COS	REPEAT
<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

21. Proper hot holding temperatures

IN	OUT	N/O	N/A	COS	REPEAT
<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

*MSSD*

Inspector

Acknowledged Receipt : Tim Viveiros

Page 2 of 5

## Food Establishment Inspection Report - FDA

### Time/Temperature Control for Safety Food (TCS Food)

	IN	OUT	N/O	N/A	COS	REPEAT
22. Proper cold holding temperatures	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
23. Proper Date Marking	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
23B. TCS Foods Disposition	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
24A. Time as a public health control: procedures	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
24B. Time as a public health control: temperatures & discarding food	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
24C. Time as a public health control: highly susceptible population (HSP)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

### Consumer Advisory

	IN	OUT	N/O	N/A	COS	REPEAT
25. Consumer advisory provided for raw or undercooked foods	<input type="radio"/>	<input type="radio"/>		<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

### Highly Susceptible Populations (HSP)

	IN	OUT	N/O	N/A	COS	REPEAT
26A. Pasteurized foods used; prohibited foods not offered	<input type="radio"/>	<input type="radio"/>		<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
26B. Reservice of foods	<input type="radio"/>	<input type="radio"/>		<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

### Chemical

	IN	OUT	N/O	N/A	COS	REPEAT
27. Food additives: approved and properly used	<input type="radio"/>	<input type="radio"/>		<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
28A. Toxic substances identified, stored and used	<input checked="" type="radio"/>	<input type="radio"/>		<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
28B. Poisonous materials, sanitizers, additives, medicines restriction, separation, storage	<input checked="" type="radio"/>	<input type="radio"/>		<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
28C. Conditions of Use: law	<input checked="" type="radio"/>	<input type="radio"/>		<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

### Conformance with Approved Procedures

	IN	OUT	N/O	N/A	COS	REPEAT
29A. Compliance with variance, specialized process, & HACCP plan	<input type="radio"/>	<input type="radio"/>		<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
29B. Treating juice- HACCP, reduced oxygen packaging w/out variance, conformance with approved procedures	<input type="radio"/>	<input type="radio"/>		<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
29C. When HACCP plan is required	<input type="radio"/>	<input type="radio"/>		<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

### GOOD RETAIL PRACTICES

Good Retail Practices are preventative measures to control the addition of pathogens, chemicals, and physical objects into foods.

IN = In compliance    OUT = not in compliance    COS - corrected on -site during inspection    REPEAT = repeat violation

### Safe Food and Water

	IN	OUT	N/O	N/A	COS	REPEAT
30. Pasteurized eggs used where required	<input type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>
31A. Water & ice from approved source	<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>
31B. Sampling, alternative water supply	<input type="radio"/>	<input type="radio"/>		<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
31C. Sampling report	<input type="radio"/>	<input type="radio"/>		<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
32. Variance obtained for specialized processing methods	<input type="radio"/>	<input type="radio"/>		<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

### Food Temperature Control

	IN	OUT	N/O	N/A	COS	REPEAT
33A. Proper cooling methods used; adequate equipment for temperature control	<input type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>



Inspector

Acknowledged Receipt : Tim Viveiros

Page 3 of 5

## Food Establishment Inspection Report - FDA

Food Temperature Control	IN	OUT	N/O	N/A	COS	REPEAT
33B. Frozen food	<input type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>
34. Plant food properly cooked for hot holding	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
35. Approved thawing methods used	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
36A. Thermometers provided and accurate	<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>
36B. Thermometers function properly	<input checked="" type="radio"/>	<input type="radio"/>			<input type="checkbox"/>	<input type="checkbox"/>

Food Identification	IN	OUT	COS	REPEAT
37A. Food properly labeled; original container		<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
37B. Food labels, labeling of ingredients		<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

Prevention of Food Contamination	IN	OUT	COS	REPEAT
38A. Insects, rodents, & animals not present		<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
38B. Handling prohibition, controlling pests, prohibiting animals		<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
39A. Contamination prevented during food storage		<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
39B. Food display; ice used as an exterior coolant prohibited as an ingredient		<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
39C. Consumer self-service operations- utensils and monitoring		<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
40A. Personal cleanliness- prohibition jewelry		<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
40B. Maintenance of fingernails		<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
41. Wiping cloths; properly used and stored		<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
42A. Washing Produce - following chemical manufacturers label		<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
42B. Washing produce		<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
42C. Washing produce- chemicals		<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

Proper Use of Utensils	IN	OUT	COS	REPEAT
43. In-use utensils; properly stored		<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
44. Utensils, equipment & linens; properly stored, dried, and handled		<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
45A. Single-use/ single service articles properly stored and used, required		<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
45B. Single-use/service articles use limitation, kitchenware and tableware preventing contamination		<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
46. Gloves used properly		<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

Utensils, Equipment and Vending	IN	OUT	COS	REPEAT
47A. Food & non-food contact surfaces cleanable		<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
47B. Food contact surfaces /utensils cleanability, molluscan shellfish tanks, consumer self-service		<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
47C. Properly designed characteristics: food and non-food contact surfaces, molluscan shellfish tanks		<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
48A. Warewashing facilities: installed, maintained, & used; test strips		<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
48B. Operational warewashing machines		<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

*MSD*

Inspector

Acknowledged Receipt : Tim Viveiros

Page 4 of 5

## Food Establishment Inspection Report - FDA

### Utensils, Equipment and Vending

49. Non-food contact surfaces clean

IN	OUT	COS	REPEAT
<input checked="" type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>

### Physical Facilities

50. Hot & cold water available; adequate pressure

IN	OUT	N/A	COS	REPEAT
<input checked="" type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>

51A. Plumbing installed; proper backflow devices

<input checked="" type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>
----------------------------------	-----------------------	--	--------------------------	--------------------------

51B. Prohibiting a cross-connection, inspection and servicing system

<input checked="" type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>
----------------------------------	-----------------------	--	--------------------------	--------------------------

51C. Approved system and cleanable fixtures, service sink

<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
----------------------------------	-----------------------	-----------------------	--------------------------	--------------------------

52A. Sewage and waste water properly disposed

<input checked="" type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>
----------------------------------	-----------------------	--	--------------------------	--------------------------

52B. Grease traps easily accessible for cleaning

<input checked="" type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>
----------------------------------	-----------------------	--	--------------------------	--------------------------

52C. Removing mobile food establishment waste

<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
-----------------------	-----------------------	----------------------------------	--------------------------	--------------------------

53A. Toilet facilities; properly constructed, supplied, & cleaned

<input checked="" type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>
----------------------------------	-----------------------	--	--------------------------	--------------------------

53B. Toilet tissue availability

<input checked="" type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>
----------------------------------	-----------------------	--	--------------------------	--------------------------

54. Garbage & refuse properly disposed; facilities maintained

<input checked="" type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>
----------------------------------	-----------------------	--	--------------------------	--------------------------

55A. Physical facilities installed, maintained, & clean

<input checked="" type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>
----------------------------------	-----------------------	--	--------------------------	--------------------------

55B. Private homes and living or sleeping quarters, use prohibition

<input checked="" type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>
----------------------------------	-----------------------	--	--------------------------	--------------------------

56. Adequate ventilation & lighting; designated areas used

<input checked="" type="radio"/>	<input type="radio"/>		<input type="checkbox"/>	<input type="checkbox"/>
----------------------------------	-----------------------	--	--------------------------	--------------------------

### MASSACHUSETTS ONLY REGULATIONS

Rules and Regulations adopted for use in Massachusetts only.

#### Facilities

57A. Catering

<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
-----------------------	-----------------------	--------------------------	--------------------------

57B. When plans are reviewed, prerequisite for operations- valid permit

<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
-----------------------	-----------------------	--------------------------	--------------------------

57C. Contents of plans and specifications, preoperational inspections

<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
-----------------------	-----------------------	--------------------------	--------------------------

58. Mobile Food Operations

<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
-----------------------	-----------------------	--------------------------	--------------------------

59. Temporary Food Establishments

<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
-----------------------	-----------------------	--------------------------	--------------------------

60. Residential Kitchens

<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
-----------------------	-----------------------	--------------------------	--------------------------

#### Procedures

61. Anti-choking Procedures

<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
-----------------------	-----------------------	--------------------------	--------------------------

62. Tobacco Products: Notice and Sale

<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
-----------------------	-----------------------	--------------------------	--------------------------

63. Food Allergy Awareness Requirements

<input type="radio"/>	<input type="radio"/>	<input type="checkbox"/>	<input type="checkbox"/>
-----------------------	-----------------------	--------------------------	--------------------------



Inspector

Acknowledged Receipt : Tim Viveiros

Page 5 of 5